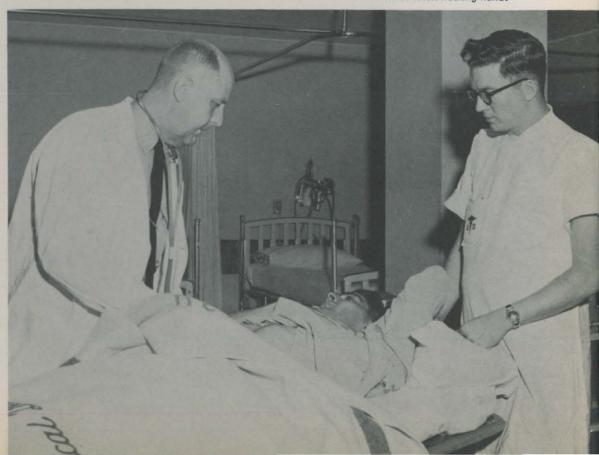






Patient arrives

Minutes later: healing hands



# U.S. NAVAL HOSPITAL U.S. NAVAL HOSPITAL CORPS SCHOOL

SAN DIEGO, CALIFORNIA

#### **OFFICERS**

REAR ADMIRAL

CAPIAII

COMMANDER







LIEUTENANT COMMANDER



LIEUTENANT (JG)

ENSIGN

CHIEF WARRANT

WARRANT













### STAFF CORPS INSIGNIA



MEDICAL



DENTAL



MEDICAL SERVICE



NURSE



SUPPLY



CHAPLAIN

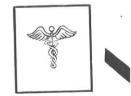


CIVIL ENG.



MSC WARRANT AND CHIEF WARRANT

### ENLISTED INSIGNIA



HOSPITAL CORPSMAN (HM)



DENTAL TECHNICIAN (DT)

















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B. W. HOGAN Rear Admiral, MC Surgeon General, U. S. Navy

## **FOREWORD**

Since the Fourth Regiment, United States Marines, came ashore at North Island in 1914 and then moved with its field hospital to Balboa Park, this area has been the site of continuous naval medical activity. During World War I, the Camp Hospital served a large training camp, expanding its bed capacity to over 800. This facility was established on a permanent basis on 20 May 1919 as the U. S. Naval Hospital, San Diego, with Captain M. D. Curl, MC, USN, as the first medical officer in command.

World War II laid vastly increased demands on the facilities and staff. These were met in an outstanding manner. When the war began, the Hospital was caring for some 1,200 patients; at the time of the greatest patient load, there were 12,014 persons under treatment, and between the outbreak of war and V-J Day approximately 175,000 patients were cared for with notable success.

The Korean Conflict again demanded a special effort in order to provide the best of professional medical and dental care to great numbers of the wounded and ill servicemen who were landed on the West Coast. The success with which this was accomplished contributed to an altogether splendid chapter in the history of the Medical Department of the United States Navy.

Beginning in 1928, the Hospital Corps School, by training generations of corpsmen, has contributed enormously to patient care in the Navy and Marine Corps. During World War II, rapid expansion was achieved, until in 1945 alone a total of 14,907

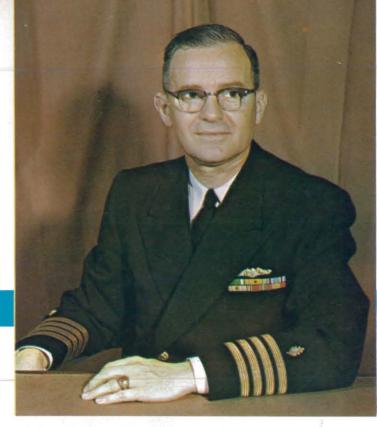
corpsmen were graduated. This helped to make possible the maximum wartime strength of 137,460 attained by the Hospital Corps. Today the School provides both Class A basic training and Class C training in pharmacy technic; in the summer of 1958 there will be added Class B advanced training.

Since the construction of the first permanent building on the present site in 1922, the physical facilities of the Hospital have been tremendously improved, culminating in the newly completed 1000-bed surgical wing. This is now our largest naval hospital, and in respect to location, buildings, and equipment is generally regarded as one of the finest in the United States. More important, the quality of professional care is unsurpassed anywhere, and fully approved resident and intern training programs are in operation.

My congratulations and thanks to all those Medical Department personnel whose ability and unselfish devotion have contributed to the splendid results so far achieved, and my sincere good wishes for the future progress of the U. S. Naval Hospital, San Diego, and its Hospital Corps School.

B.W. Hogan

B. W. HOGAN Rear Admiral, MC Surgeon General, U. S. Navy



CAPTAIN
ALLAN S. CHRISMAN, MC, USN
Commanding Officer
U. S. Naval Hospital

Allan Simpson Chrisman was born in Greensboro, North Carolina, on July 18, 1906, son of John Riley and Sara Jane (Watlington) Chrisman. He attended public schools in Charlotte, North Carolina, was graduated from the University of North Carolina with a Bachelor of Science degree and received the degree of Doctor of Medicine from Harvard Medical School in 1930. Commissioned Lieutenant (jg) in the Medical Corps of the U. S. Navy on June 3, 1930, he subsequently advanced to the rank of Captain to date from March 20, 1945.

After a year's internship at the Naval Hospital, Philadelphia, Pennsylvania, he reported in July 1931 to the Submarine Base, New London, Connecticut, and for five months was a student at the Submarine School. He served as Medical Officer aboard the USS S-4 from December 1931 to April 1933, and during that period made a tour of all Submarine Bases in connection with submarine escape training. He next served for nine months as Medical Officer of the USS BEAVER, tender for Submarine Squadron 4, based on Pearl Harbor, Territory of Hawaii.

From January to October 1934 he was attached to the Naval Hospital, San Diego, California, and during the four years following had duty as Medical Officer at the Submarine Base, New London, Connecticut, primarily concerned with the Submarine Escape Training Tank and Dispensary. Sea duty from September 1938 to July 1940 as Medical Officer aboard the USS RANGER, aircraft carrier of the Atlantic Fleet on Neutrality Patrol, preceded graduate instruction at the Naval Hospital, Washington, D. C., where he had a Residency in Radiology.

He was detached from the Naval Hospital, Washington, D. C., in August 1941, and during the early period of the United States' participation in World War II, he served successively in the X-ray Departments of the Naval Hospitals, Parris Island, South Carolina, and Bethesda, Maryland. In September 1942 he joined the USS PINKNEY, and as her Medical Officer, saw action

in the South Pacific Area. In August 1943 he reported as Base Medical Officer at the Advanced Naval Base, Tulagi, Solomon Islands, and there had charge of the Tulagi-Florida Medical Facilities.

In January 1944 he returned to New London to be Assistant Officer in Charge of the Medical Research Laboratory. As such he assisted in submarine personnel selection for Commander Submarines, Atlantic. He was awarded a Letter of Commendation, with Ribbon, from the Commander-in-Chief, U. S. Atlantic Fleet, "For meritorious service as Assistant Medical Officer in Charge of the Medical Research Department, U. S. Submarine Base, New London, Connecticut, during the period from March 1944 to February 1945 . . . "

From January 1945 to July 1950 he served consecutively at the Naval Hospitals at Bainbridge, Maryland (Executive Officer); Newport, Rhode Island (Xray); Aiea, Territory of Hawaii (X-ray); and Camp Lejeune (Executive Officer). For a year he was a student (senior course) at the Naval War College, Newport, Rhode Island, reporting upon graduation in June 1951 to Commander Submarines, Atlantic, for duty as Force Medical Officer. In September 1952 he was transferred to the Bureau of Medicine and Surgery, Navy Department, Washington, D. C., for duty as Personnel Officer. On 10 August 1956 he reported to the U. S. Naval Hospital, San Diego, California, as Commanding Officer of the Hospital and Hospital Corps School.

In addition to the Commendation Ribbon, Captain Chrisman has the American Defense Service Medal with Fleet Clasp; the American Campaign Medal; the Asiatic Pacific Campaign Medal with one engagement star; the World War II Medal; the National Defense Service Medal and Korean Service Medal. He is a member of Phi Kappa Sigma, Phi Chi and Phi Beta Kappa fraternities; the Lions Club.

Dr. Chrisman is married to the former Eleanor Krekeler of Montclair, New Jersey. He has three children, Caroline, Jane and Allan.



CAPTAIN
MORRIS M. RUBIN, MC, USN
Executive Officer
U. S. Naval Hospital

Captain Morris M. Rubin attended public schools at Pasadena, California, was graduated from the University of California with a Bachelor of Arts Degree in 1928. On completion of Medical School at the University of California, he began his internship at the Los Angeles County General Hospital in May 1931.

He began his Naval career as a LTJG, MC, at the Naval Hospital, San Diego, California, completed his internship and received the Doctor of Medicine Degree from the University of California in 1932.

From 1933 to 1936, he served at the Naval Dispensary, Long Beach, California, March Field Army Air Force Base, Marine Corps Base, San Diego, California, and the USS Saratoga.

He served in Destroyer Division Seventeen aboard the USS Winslow, then to the Naval Dispensary, Seaside, St. Mary and Community Hospitals in Long Beach under instruction in obstetrics and gynecology.

In 1939 he attended a course in obstetrics and gynecology at the Cook County Graduate School of Medicine, Chicago, Illinois, then reported for duty as Chief of Obstetrics and Gynecology at the Naval Hospital, Brooklyn, New York.

The year 1941 found Dr. Rubin at the Naval Dispensary, Pearl Harbor, the Queens, Kapiolani and St. Francis Hospitals in Honolulu, Territory of Hawaii.

He became qualified as a flight Surgeon at the Naval Air Station, Pensacola, Florida, and reported for duty as senior Medical Officer at the Naval Air Station, Santa Barbara, California. From 1943 to 1945, Dr. Rubin served aboard the USS Langley, USS Wasp, and in the summer of 1945 was transferred to Commander Fleet Air, Alameda, as Staff Medical Officer. In September 1946, he was assigned as Staff Medical Officer to Commander Fleet Air, West Coast.

The period from September, 1946, to 1952 was spent at Naval Hospital, Mare Island, California, Aiea and Tripler Army Hospital, Honolulu, Territory of Hawaii, and U. S. Naval Hospital, Oakland, California. In 1952 he reported to Naval Hospital, Great Lakes, Illinois, as Chief of Dependents' Service and Obstetrics-Gynecology.

In 1956, Dr. Rubin reported for duty at the U. S. Naval Hospital, San Diego, California, as Executive Officer.

In addition to the Commendation Ribbon, with combat citation, Captain Rubin has been awarded the Navy Unit Citation, Defense Medal with sea duty citation, American Theatre Medal, Pacific Theatre Medal with 4 stars, World War II Medal and Philippine Liberation Medal with 2 stars.

He holds membership in the American Boards of Obstetrics-Gynecology, American College of Surgeons, American College of Obstetricians and Gynecologists, American Committee for Maternal and Infant Welfare, Aero Medical Association and the American Medical Association.

Dr. Rubin is married to the former Rose Marion Garson of Sierra Madre, California, and has a son, Roy, who is attending Stanford University at Palo Alto, California.



COMMANDER
CHARLES F. MANN, MSC, USN
Administrative \*Officer
U. S. Naval Hospital

Charles Frank Mann was born on a farm in Midland County, Michigan, on 18 July 1905, son of Charles E. Mann and Henrietta (Heller) Mann. He attended public schools in Porter and Breckenridge, Michigan. He attended night courses of instruction in high school, Junior College and Universities. He received his Master's Degree in 1946 in Commercial Science from Southeastern University, Washington, D. C.

He enlisted as a Private in the U. S. Army Medical Department in 1920 and enlisted in the U. S. Navy as a Seaman, Second Class, in 1923. Except for brief periods between enlistments, he remained continuously on active duty for the past 36 years.

He graduated from the Pharmacist Mates School in 1923, from X-ray Technicians School in 1927. In 1940, he completed training required to become an aviation medical technician. Following his return from the South Pacific in 1944, he attended a six months' accelerated course in Accounting and Business Management in Washington, D. C. After a tour of duty in the Bureau of Medicine and Surgery, he attended the Naval School of Hospital Administration, Bethesda, Maryland.

He has been assigned duty in 27 ships and stations, including duty with the Fleet Marine Force, Submarine Squadron Four and Patrol Wing Two. He has served six times in hospital ships, including duty in the USS Solace from prior to the Battle of the Coral Sea until after the Guadalcanal campaign. He was then directed to assume duty as Executive Officer of Medical Store-

house No. 1 in New Zealand which provided medical supplies and equipment for the South Pacific.

During his tour of duty in Samoa, thirty years ago, he was one of the first men in the South Pacific to pioneer the multiple pressure method in the vaccination of more than eight thousand natives against smallpox.

In 1949 while serving as the Administrative Assistant to the Commanding Officer, U. S. Naval Hospital, Corona, California, the hospital was closed and he became the officer in charge of disestablishment. Following the outbreak of hostilities in Korea he reported for duty as Administrative Officer of the U. S. Naval Hospital, Camp Pendleton, California. His next assignment was as the Administrative Officer, U. S. Naval Hospital, Yokosuka, Japan. In 1955 he reported for his present assignment as Administrative Officer, U. S. Naval Hospital, San Diego.

Commander Mann received the Navy Good Conduct Medal with two stars; the Second Nicaraguan Campaign Medal; the American Defense Medal with Fleet Clasp; the American Theatre Campaign Medal; the Asiatic-Pacific Campaign Medal with one star; the World War II Victory Medal; the National Defense Service Medal; the Korean Campaign Medal; and the United Nations Medal for service in the Far East.

Commander Mann is married to the former Ella Lucille Miller of Wray, Colorado. They have two children, Mrs. Eugene Adams and Charles, Jr., also three grandsons, Steve, Gregg and Scott Adams.



Main Gate





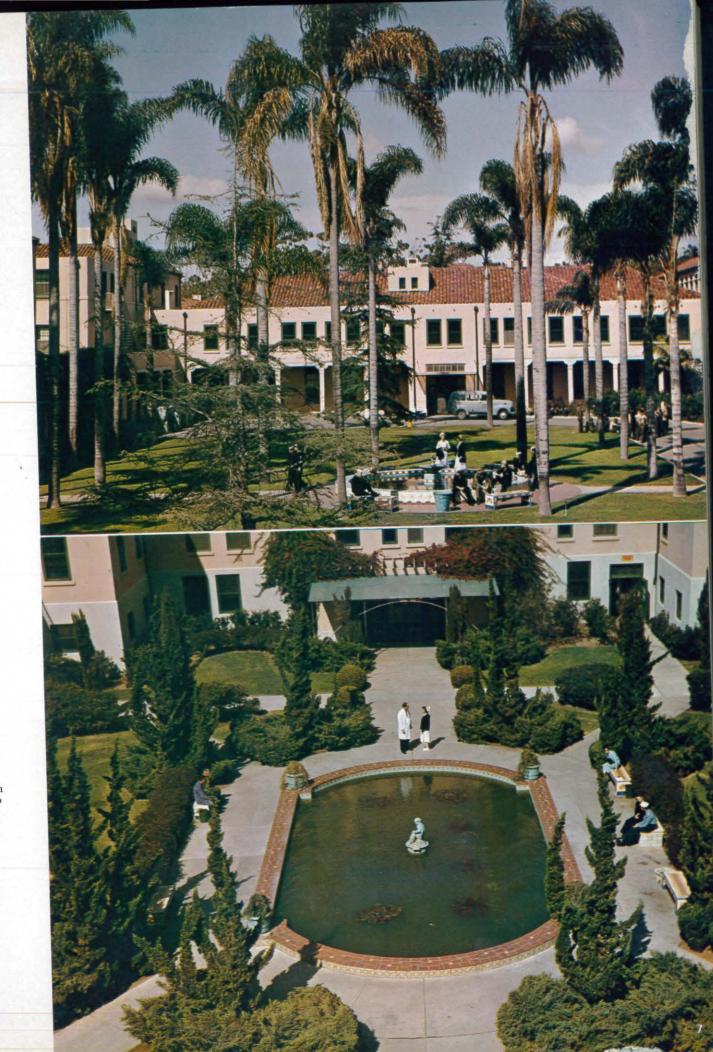
Administration Building, Golf Course in the foreground.



This view of the Hospital looking north shows Officers' Quarters and swimming pool in the foreground.

Looking west, Hospital Corps School in the foreground.





South Patio

Center Patio

# U. S. NAVAL HOSPITAL, SAN DIEGO, CALIFORNIA



One of the Largest and Most Beautiful in the World







Spinal Anesthesia

Hernioplasty



Surgical Building

Appendectomy

Gastrectomy







Nurses' Quarters



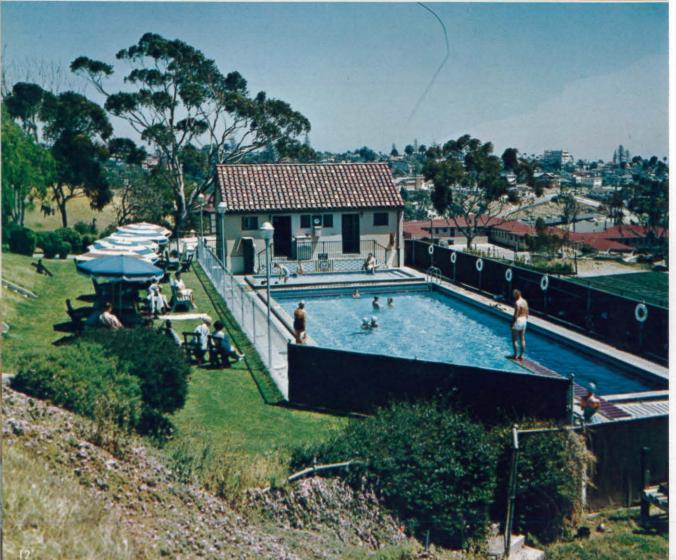
Corpsmen's Barracks



Chief Petty Officers' Dining Room



Recreation Building



Swimming Pool COMMANDER
CHARLES L. CRAWFORD
Executive Officer
U. S. Naval Hospital Corps School



Charles Lester Crawford, Medical Service Corps, USN, Executive Officer of the U. S. Naval Hospital Corps School, San Diego, was born in Altoona, Iowa, 7 April 1901, where he attended public schools, and where he was employed as a pharmacist's apprentice until his enlistment in the Navy in April, 1919. He has had continuous service since then, except for three and a half months between his first and second enlistments.

In 1934 he was appointed Pharmacist; Chief Pharmacist in 1940, Lieutenant, Junior Grade, Hospital Corps, 1942, Lieutenant, HC, 1943, Lieutenant Commander, HC, 1945, and Commander, MSC, 1952.

During his enlisted service, 1919 to 1934, Commander Crawford trained at Great Lakes, saw general hospital corps duty at the Receiving Ship in Bremerton, San Francisco and New York; recruiting duty in Des Moines; served in Naval Hospitals at Pearl Harbor and Great Lakes; saw sea duty in the USS Seattle, USS Sands, USS Whitney, and USS Relief. From 1931 to 1935 he was Recorder for the Naval Examining Boards at the Washington, D. C., Medical School.

Prior to World War II, Commander Crawford was accounting Officer at the USN Hospitals in Pensacola, Florida, and Canacao, P.I., and from 1939 to 1941 he was Instruction Officer and Personnel Officer at the NH Corps School, Portsmouth, Va. He was Stores Issue Officer at the Brooklyn

Naval Supply Depot when the U.S. entered the War.

Commissioned a Lieutenant (jg) in 1942, he was ordered to the Naval Base at Rosneath, Scotland, where he served a year as Administrative Assistant to the Base Medical Officer, and in June, 1943, he was made Administrative Assistant to the Force Medical Officer on the Staff of Commander, Naval Forces, North African waters. He held this post until April, 1944, and won the Bronze Star Medal with Combat "V."

Following were tours as Administrative Assistant to the Medical Officer of First Naval District, Boston, and Medical Officer in Command at the Medical Center, Bethesda. His next tour was with the Armed Services Medical Regulating Office, where he served as Executive Officer, Deputy Chief and Chief.

In 1953 he was Medical Administrative Officer on the Staff of Commander-in-Chief, Pacific Fleet, and from October, 1954, to October, 1957, he was Commanding Officer, USN School of Hospital Administration, Bethesda, where he earned a letter of commendation from Surgeon General Admiral Bartholomew W. Hogan.

Commander Crawford is married to the former Agnes Clarke of St. Charles, Iowa. Their official address is 7705 13th Street, NW, Washington, D. C.



LIEUTENANT COMMANDER KENNETH V. RICE, MSC, USN Administrative Officer U. S. Naval Hospital Corps School

From Apprentice Seaman through the ranks of Warrant, Ensign, Lieutenant (jg), and Lieutenant, to Lieutenant Commander in 27 years, is a very brief history of the career of Lieutenant Commander Kenneth V. Rice, MSC, USN, Administrative Officer of the USNH Corps School, San Diego.

Lieutenant Commander Rice, who was born 23 November 1910, at Portland, Oregon, first enlisted in 1928, with his first duty at USNH Corps School, San Diego. From then, during his enlisted status, he served in this hospital and the one at Bremerton; aboard the USS Pennsylvania for 18 months, then back at USNH San Diego from-1933 to 1935; back to sea on the USS Ramapo, ten months at USNH Canocao, the Navy Yard at Cavite, and then in 1938 he finished a year's tour on the USS Black Hawk in Asiatic waters; back to the Canacao Hospital for three months,

seven months with the Marine Battalion at San Diego, and another seven months at USNH San Diego; then to the Dispensary, Long Beach, California, followed by two years and a half on the USS Gillis.

During his commissioned service his longest tour was at the Corps School here as Personnel and Administrative Officer, from May, 1948 to January, 1954. This was followed by 16 months at USNH Portsmouth, Va., and two years at the Amphibious Base, Coronado.

In July last year Lieutenant Commander Rice was again ordered to USNH Corps School, San Diego, as Administrative Officer, the billet he now holds. He is married and lives with his wife, Dale Elizabeth, and their three sons, Kenneth, Vergal and Erroll, at 3112 Central Avenue, San Diego.



Inspection: Hospital Corps School Personnel

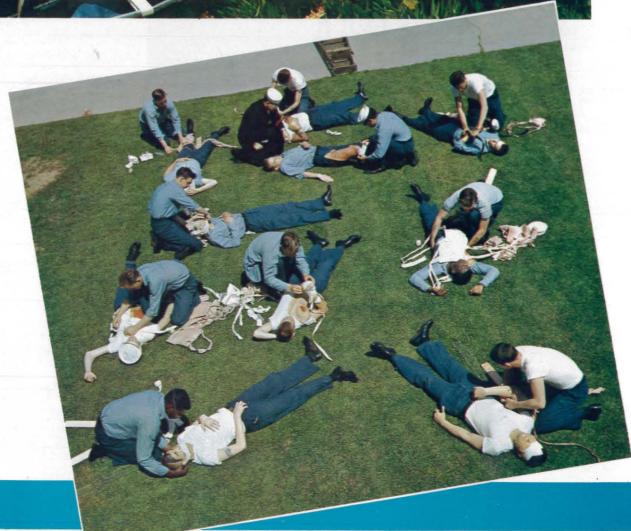


Enlisted Barracks: Hospital Corps School





Student Corpsmen First Aid Class



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### HISTORY OF THE MEDICAL DEPARTMENT

The story of the Medical Department of the United States Navy is one to arouse pride and stimulate enthusiasm in every American citizen. Such continuous, and at times stupendous strides forward, have been taken in the quality of the medical care provided for personnel of the Navy and Marine Corps as to be almost unbelievable.

It is good to note and give thought to just how far we actually have advanced beyond the conditions of ignorance and neglect that were prevalent in the eighteenth century. Then, disease and pestilence were rampant, and a severely wounded sailor had little hope of survival; now, the morbidity rate in the Navy has been reduced to the lowest point in history, and in the Korean Conflict the mortality rate for Navy and Marine Corps personnel who had been wounded in combat was only 2.0 per cent, truly an all-time low.

The practice of naval medicine in America had its beginnings late in 1775, when the first American fleet was placed in commission by acts of the Continental Congress. Physicians originally were selected by commanders of naval vessels to serve on individual voyages, and often were assisted only by the oldest or most incompetent of the seamen on board. Much of the financial reward the Surgeon could expect consisted of a share in such booty as the ship might capture.

In 1798, when the Navy Department was established, surgeons and surgeons' mates were given the status of commissioned officers, but then and for the next 44 years there was no medical department, only individual officers who were not organized in any sense. During this period, there was only gradual evolution toward adequate medical support of the Navy. A Marine Hospital Fund, made up of monthly payments from all seamen and later augmented by money from fines and forfeitures, was established to finance hospitals. Most hospitals were in unsatisfactory buildings selected without plan, and a major accomplishment of the Fund was making arrangement for building the first permanent hospital, at Norfolk, Virginia. This hospital began to receive patients in 1830. Other hospitals, financed by regular appropriations,

soon followed—in Philadelphia in 1833, in Boston in 1836, and Brooklyn in 1838.

Throughout this first portion of the nineteenth century, a number of able and energetic physicians fought for a well-organized and adequately-equipped medical department. Their efforts resulted in considerable improvement in the quality of professional personnel, in medical equipment and supplies, and in quarters for the sick on board ships and at hospitals ashore. Notable among these men were Edward Cutbush, Usher Parson, Lewis Heerman, and William P. C. Barton.

Doctor Barton, in particular, made numerous contributions that had a great and lasting effect in improving medical care. He was an early advocate of increasing the space assigned as a sick bay on board ship, and of standardizing equipment and supplies for the medical departments of ships. He also was responsible for establishing a medical library in each naval medical unit and for instituting a medical journal on each patient; however, his proposal for utilizing female nurses in hospitals went unheeded for two generations.

Perhaps his greatest contribution was in writing his Treatise Containing A Plan for the Internal Organization and Government of Marine (Navy) Hospitals. Certainly this classified treatise and his continuous efforts had much to do with the establishment in 1842 of the Bureau of Medicine and Surgery, which was created to supervise naval medical affairs along the lines he had proposed. Most appropriátely, he was named the first Chief of Bureau. (The title of Surgeon General was not created until 1871 and was first held by William M. Wood, the fifth Chief of Bureau.)

From its inception, the new Bureau made notable progress in organizing, developing, and perfecting naval medicine. Fascinating accounts of many aspects of this progress can be found in the reports to the Secretary of the Navy made each year since Civil War times by the Chief of Bureau or, after 1871, by the Surgeon General. This unbroken series of annual reports has been of great value to students of preventive medicine, vital statisticians, and public health

authorities, in determining trends of morbidity and mortality rates.

One development that had an early beginning—the establishing of hospitals in ships—conferred mobility on definitive medical and surgical care, making it possible to furnish such care wherever on the seven seas it might be needed. The best-known hospital ship employed during the Civil War, the Red Rover, was a Mississippi sidewheeler captured from Confederate forces and converted for use as a hospital under the command of Surgeon Ninian Pinkney. The staff included the first female nurses of whom there is any record in the Navy. They were Nursing Sisters who volunteered only for service during the war.

Other hospital ships followed; of these the USS Solace, converted to hospital use in 1898 during the Spanish-American War, was the first of our naval vessels to fly the Geneva Red Cross flag. A long controversy over whether a medical or a line officer should command such a ship finally ended in placing a line officer in command of the ship proper, with a medical officer in command of the hospital within the ship and of all professional medical matters.

During World War I and World War II, more and more advanced hospital ships were developed, particularly those few that were built from the keel up for this purpose. Near the close of the latter war, some 12 hospital ships were in operation by the Navy, those of the Haven class being of advanced design. Still greater effectiveness was achieved during the Korean Conflict by the addition of landing platforms for helicopters so that casualties wounded in battle could be flown in a matter of minutes from close behind the front line to the safety and expert care available on the ship. Such atraumatic and expeditious handling saved many lives.

Other early developments of great value were instituted by the Bureau of Medicine and Surgery. A book of Instruction for Medical Officers, now known as the Manual of the Medical Department, was first published in 1886. A Naval Medical School was established by Surgeon General Presley M. Rixey in 1902 for post graduate instruction of newly appointed medical officers in special aspects of naval medicine. Annual physical examinations of naval personnel were begun in 1909. To provide information on current progress in professional matters to Medical Department personnel, wherever they might be, publication of the U. S. Naval Medical Bulletin was inaugurated in 1907. The Bulletin with its successor, the U. S. Armed Forces Medical Journal, have been published continuously to the present day. A supplementary Hospital Corps Quarterly, now the Medical Technicians Bulletin, was provided for non-professional Medical Department personnel.

It is especially enlightening to consider the changes that have taken place over the years in the status of various component groups having a part in naval medicine. The term, "Medical Corps," was first employed in an appropriation act of 1871. Thereafter medical officers were listed as mem bers of the staff corps of the Navy. Their grades were Medical Director, Medical Inspector, Surgeon, Passed Assistant Surgeon, and Assistant Surgeon, with ranks of Captain, Commander, Lieutenant Commander, Lieutenant, and Master (later changed to Lieutenant, junior grade). Since 1918, medical officers have held the regular military titles of their rank.

Prior to 1898, enlisted assistants to medical officers were known successively as loblolly boys, surgeons' stewards, apothecaries, nurses, and baymen. In that year the Hospital Corps was established by legislation, which specified qualifications and duties. The 60 years that have elapsed since then have seen the Hospital Corps demonstrate increasingly high morale and technical competence based both on the fine quality of personnel assigned to the Corps and the careful training afforded each member.

The Navy Nurse Corps was established without commissioned rank in 1908, and women nurses thereafter served ably in many shore-based hospitals and on hospital ships. In World War II over 11,000 nurses were in service. An act of 1947 made members of the Nurse Corps permanently commissioned staff officers with rank, pay, and allowances equal to those of other staff officers up to and including Captain. Officers of the Nurse Corps have performed invaluable service in field medical units in Japan and Korea,

in troop air transports, on hospital and sea transport ships, and in all shore-based hospitals.

The Dental Corps was established in 1912, and dental officers served with distinction in both world wars and in Korea. Over 7,000 were in service during World War II. In 1945 an organizational change in the Bureau assigned to dental officers the technical control of dental activities ashore and afloat.

The Medical Service Corps was established in 1947, giving commissioned rank to administrative specialists and men trained in such fields as pharmacy, optometry, psychology, bacteriology, and other sciences related to medicine. Officers of the Medical Service Corps, with ranks up to and including Captain, have been of immeasurable assistance to medical and dental officers by absorbing much of the administrative workload and serving as specialists in various sciences.

During the present century, training and technical education have expanded continuously, in step with growing specialization, increasing complexity of the medical sciences, and enlarging scope of Medical Department operation. In 1902 there was established, in addition to the Naval Medical School, the first school for training hospital corpsmen. This was at Norfolk, Virginia; other schools were established later at Great Lakes, Illinois; Bainbridge, Maryland; and San Diego, California. In 1922, the Naval Dental School was inaugurated for postgraduate training of dental officers. In 1939, the Naval School of Aviation Medicine was set up at Pensacola, Florida; in 1942 the Naval School of Hospital Administration was started at Bethesda, Maryland; and in 1951 Field Medical Service Schools were commissioned at Camp Pendleton and Camp Lejeune.

The Bureau of Medicine and Surgery observed its 116th anniversary on 31 August 1958. It is the only Navy bureau still retaining its original name as established by Congress in 1842, but only since 1942 has it occupied the present quarters in the group of buildings around the old Naval Observatory. Its more recent accomplishments, and those of the devoted officers and men who constitute the Medical Department of the United States Navy, have been so many and varied that they cannot even be mentioned in this short historical sketch. Suffice it to say that naval medicine has made tremendous progress since 1775, and that in recent years this progress has been accelerated enormously. Today, the quality of professional care furnished to Navy and Marine Corps personnel is outstanding and second to none.



MODERN SURGERY

# U. S. NAVAL HOSPITAL, SAN DIEGO, CALIFORNIA

#### **MISSION**

The primary mission of this Hospital is to provide general clinical, hospitalization and dental services to military personnel of shore activities and fleet units with the object of their expeditious return to duty and the prompt disposition of those patients who require special treatment not satisfactorily available or who are found physically unfit for retention in the military service.

The secondary mission of this hospital includes the instruction of Medical Department personnel, including intern and resident training; the care and treatment of authorized nonmilitary patients; research in authorized medical and related projects; and cooperation with military and civil authorities in matters pertaining to health and sanitation and in the event of local disasters or emergencies.

#### HISTORY

On 20 May 1958, the Hospital completed its thirty-ninth year of rendering aid to military personnel and their dependents. Today, this institution stands as a monument to the progress of the Navy and is a picturesque landmark in the State of California.

A historical account of the present hospital would not be complete without a brief statement of facts of its founders and forerunners. Returning from Mexican waters in the Summer of 1914, the Fourth Regiment of the U. S. Marine Corps landed and established a base on North Island and in so doing gave being to the San Diego area as a great naval center. Lieutenant Commander U. R. Webb, who 17 years later became Medical Officer in Command of the Hospital, was the Senior Medical Officer attached to the Fourth Regiment. During the latter half of 1914, the Fourth Regiment, along with its field hospital, was moved to Balboa Park as an exhibit in the Panama-California Exposition and remained there until the exposition closed in the Spring of 1917.

With the advent of World War I, officials of the City of

San Diego and the Navy Department realized the opportunities afforded by the Balboa Park Exposition Grounds for use as a naval training center and on 20 May 1917, the Center was officially established.

The medical segment of the Naval Training Center was housed in the Headquarters Building of the Park Police. This building, then named the "War Dispensary," provided space for the medical administrative unit and two wards of 25 beds each. As the training center grew, the War Dispensary expanded so rapidly that tent camps had to be set up to accommodate the sick and injured personnel. By the end of the war the "tent city" had reached an 800 patient capacity.

Commander Ammen Farenholt, who later retired in the rank of Rear Admiral, was the first senior Medical Officer of the War Dispensary. It was through Admiral Farenholt's hobby of collecting war relies that various familiar landmarks located at the hospital today were acquired. Two naval cannons used by the U. S. Marines during the Mexican War,





a sundial and plaques at the main gate, lower gate and above the entrance of the Administration Building were donated by the Admiral.

During the course of World War I, Navy Officials realized that San Diego would be an ideal location for a permanent air station, Marine Corps base, naval training station and a naval hospital large enough in size and facilities to serve the military personnel. On 20 May 1919, the Secretary of the Navy changed the title of the War Dispensary to the designation of Naval Hospital and ordered plans for the construction of a permanent hospital.

Inspiration Point was offered the Navy by San Diego for the hospital site. It was a tract of land worthy of the name Inspiration Point, for it comprises a hilltop of 92.66 acres and offers a beautiful view of Balboa Park and picturesque San Diego Bay. The contract for the construction of the first buildings was drawn in October 1920. It called for a central administration building flanked by three wards on each side. Rear Admiral Edward R. Stitt, Surgeon General of the Navy, was responsible for the early planning of the hospital. The street running in front of the three original buildings was named Stitt Avenue in honor of the man who had so much to do with the structural planning. The construction also included four other buildings; among them the Surgical Suite and Mess Hall. The hospital was built at a cost of \$1,103,321. The work was accomplished and the establishment placed in commission on 22 August 1922.

The equipment from the War Dispensary was moved to the present Hospital location. Captain F. W. F. Weiber, second commanding officer of the hospital, then instituted the landscaping of the grounds. William H. Crofts, an English gardener who had established a reputation as a master gardener during 10 years' service on the estate of the Duke of Norfolk in Sheffield, England, and who had 10 years' experience in America, was hired as Head Gardener. The results of Crofts' work was a display which brought much praise from people who appreciated the wonderful symmetry and design. The landscaping of the grounds lives on as a tribute to the workers who made the hospital grounds the most beautiful in the State of California.

The first buildings provided bed space for less than 300 patients while the daily census of patients in 1923 was 400. Tents, erected in what is now the main patio, provided for the overflow. At that time three additional buildings were under construction. These buildings were completed in 1924 at a cost of approximately \$500,000 and added a medical and surgical department of three wards with 172 beds each. This brought the hospital's total bed capacity up to 618. The third building was a service building which housed the shops, laundry and garage.

The Fleet concentration in the Pacific and the growth of naval shore activities increased so that in 1925 the bed capacity of the hospital was once again inadequate. Captain Raymond Spear, then Medical Officer in Command, recommended the construction of four new buildings which included North wards, a laboratory department, an X-ray department, a nurses' quarters and an incinerator building. Completion of these buildings brought the number of available beds up to 882, but another shortage occurred in 1928. The fourth contract provided for a contagion ward at the south end of the patio, a Hospital Corps School and a Morgue.

The entire compound in 1928 represented an investment





of \$3,500,000. In addition, a \$47,000 recreation hall had been donated by the Red Cross in 1922.

In 1929, a \$250,000 contract provided a sick officers' quarters at the north end of the grounds and four officers' quarters at the south end of the compound. This brought the bed capacity up to 1035.

At the beginning of World War II, the Hospital consisted of 56 buildings with an authorized bed capacity of 1,424. By the end of the war, the command had so expanded that it was divided into six units. These units were composed of a total of 241 buildings on a combined area of 247 acres with an authorized bed capacity of 10,499.

Unit One consisted of the buildings on the Reservation. Unit Two consisted of 33 acres and 25 exposition buildings in Balboa Park which were taken over by the Navy in 1941. This unit also had a "city" of 239 tents. Unit Three, Camp Kidd, was transferred to the Hospital in 1944 and became the Hospital Corps School. It was made up of 33 converted Army barracks in the central section of Balboa Park. Unit Four was made up of 28 Army barracks in the southwestern section of the park. Unit Five was composed of 11 buildings used for storage for the crew and patients. Unit Six consisted of the convalescent branch of the hospital at Rancho Santa Fe, located 30 miles from the main Hospital.

At the outbreak of the war in 1941 the Hospital was caring for approximately 1,200 patients with 728 staff members on duty. The staff consisted of 93 medical officers, 82 nurses and 518 enlisted corpsmen. In August 1945, the last month of the war, the Hospital cared for an average of 8,096 patients. During this period — World War II — approximately 172,000 patients were treated, the peak having been reached on 27 December 1944, when the patient census soared to an all-time high of more than 12,000.

When the war terminated, the six additional hospital units were disestablished and the Balboa Park properties were returned to the City of San Diego.

In the era following the end of World War II the program of expansion was once more undertaken.

In 1946, a Residency Training Program was established for the training of medical officers in the various specialties. This program has continued to the present time and has been continuously supported by an additional staff of outstanding civilian medical specialists in the area who serve as consultants.

In 1947, a new nurses' quarters was completed with accommodations for 88 nurses. At the outbreak of the Korean Conflict, the Hospital had added a new animal house, a large parking shed, a maintenance service building which housed a machine shop and key shop, a lubrication hoist, a paint and spray booth and a smaller parking shed.

During the Korean Conflict the Hospital once again lived up to its slogan, "Men as well as ships need a haven for



Captain Chrisman cuts ribbon at dedication of Surgical Building 26, May, 1957, as Rear Admiral Hogan looks on.

repair," as is evidenced by some 90,000 patients being treated from the beginning of the conflict until the truce was signed on 26 July 1953.

In 1952, the Sick Officers' Quarters were expanded and the Navy Exchange Restaurant was enlarged. The Spring of 1955 saw the completion of the Transportation Building at the south end of the compound. At this time Transportation vacated the basement of Building 11 and a laundry and uniform and tailor shop moved in. June of 1954 marked the beginning of construction of the new surgical building which was commissioned 15 May 1957, at a cost of approximately \$7,300,000.

The U. S. Naval Hospital, San Diego, is one of the largest military hospitals in the world, maintaining a staff of approximately 450 officers, 700 enlisted personnel and 700 civilian personnel. The Hospital has often been spoken of as one of the finest hospitals, civilian or military, in the

United States. It is a specialized treatment center for oncology, neurosurgery, plastic surgery, thoracic and cardiovascular surgery, tuberculosis and acrylic ocular prosthesis.

As an outstanding citadel of mercy, the Hospital has been a leader in the field of medicine and has kept up with the highest traditions of the Naval Service as well as the traditions of the medical profession.

Now, in this, the Hospital's 39th year, the personnel and the institution rededicate themselves to keep alive in the future the slogan, "Men as well as ships need a haven for repair"... a symbol to be carried throughout the years in the march toward greater heights as a leader in the Navy and in the field of medicine.

The Hospital is commanded by Captain A. S. Chrisman, Medical Corps, U. S. Navy. Former Commanding officers were:

#### WAR PERIOD DISPENSARY

COMDR. AMMEN FARENHOLT June 1917 to Jan 1918

LIEUT. COMDR. W. H. BUCHER, RET. Jan 1918 to Feb 1919

CAPTAIN H. C. CURL Feb 1919 to May 1919

#### U. S. NAVAL HOSPITAL

CAPTAIN H. C. CURL May 1919 to May 1922

CAPTAIN F. W. F. WIEBER May 1922 to April 1925

CAPTAIN RAYMOND SPEAR May 1925 to Oct 1929

CAPTAIN D. N. CARPENTER Oct 1929 to Nov 1931

CAPTAIN U. R. WEBB Nov 1931 to Feb 1935

CAPTAIN F. E. PORTER Feb 1935 to Aug 1938

CAPTAIN J. M. MINTER Aug 1938 to July 1940

CAPTAIN WILLIAM CHAMBERS Aug 1940 to Sept 1942

CAPTAIN GEO. C. THOMAS Sept 1942 to July 1943 CAPTAIN M. D. WILLCUTTS July 1943 to Mar 1945

CAPTAIN J. W. ALLEN Mar 1945 to Apr 1946

CAPTAIN I. W. JACOBS Apr 1946 to Mar 1947

CAPTAIN F. R. HOOK Mar 1947 to Feb 1948

CAPTAIN R. D. MACKEY Feb 1948 to Aug 1950

CAPTAIN O. B. MORRISON, JR. Aug 1950 to Feb 1952

CAPTAIN W. F. JAMES Feb 1952 to Feb 1954

REAR ADMIRAL R. M. GILLETT Feb 1954 to Aug 1956

CAPTAIN A. S. CHRISMAN Aug 1956 to —

# COMMANDING OFFICER'S OFFICE

The Office of the Commanding Officer consists of the Commanding Officer, Captain A. S. Chrisman, MC, USN, the executive officer, Captain M. M. Rubin, MC, USN, and the Administrative Officer, Commander C. F. Mann, MSC, USN. Also in the office of the commanding officer, there is a Secretary-Public Relations Assistant, Administrative Assistant to Executive Officer, and a Clerk.

The Commanding Officer is charged with the command, organization and management of the hospital. He is responsible for the professional care and services provided to the patients in the hospital and for the safety and well-being of the entire hospital command. Subject to the orders of higher authority, he exercises complete military jurisdiction within the hospital reservation.

The Commanding Officer is responsible for the sound and legal expenditures of the funds allotted to the hospital for its operation; and he is responsible for the maintenance of orders for the administration of discipline within the hospital command. He may re-enlist or extend re-enlistments of the enlisted personnel attached to his command for duty; also patients, physically and otherwise qualified, who desire to re-enlist within 24 hours following discharge. He is responsible for the public information program of the hospital, which embraces all areas of public relations applicable to and in the interest of the hospital. He establishes, preserves

and promotes good relations with local professional, civic, welfare, and business organizations.

The Commanding Officer holds periodic staff conferences to discuss professional and administrative subjects, and arranges for civilian consultants to meet with the hospital staff on consultations, professional training, and other matters.

The Commanding Officer makes necessary inspections to determine that the hospital is adequately equipped and staffed, that it is functioning economically and effectively, that the clinical services and administrative divisions are well managed and maintained, and that pertinent laws, regulations, directives and orders are being enforced.

Further, the Commanding Officer is responsible in local disasters or emergencies, especially in handling of casualties.

Finally, the Commanding Officer may, at his discretion and when not contrary to law or regulations, delegate duties to the executive officer, administrative officer, and other subordinates, as appropriate, to the maximum extent consistent with effective administration.

Such delegations of authority in no way relieve him of responsibility for the efficient performance of his functions and the safety, well-being and efficiency of his command.



COMMANDING OFFICER'S SECRETARY: Miss Margaret Calderone.



BON VOYAGE: Captain Chrisman bids farewell to Comdr. Ansari, Pakistan Navy Surgeon, as he leaves for Karachi.



TURKISH SURGEON: Comdr. Cemil Aksoy cuts cake at farewell party attended by Captain Chrisman; Captain Hanner; Captain Ballenger; Captain Kaufman; Commander Whatley; Lieutenant Sedwitz.



CO'S INSPECTION: Jerry D. Hunt, HN; Captain Ernst R. Moeller, MC; Mary N. Crowley, Lieut. NC; Captain Chrisman; Jerald Thacker, CEC, USN; Alberta Burk, Comdr., NC, Chief of Nursing; Ronald Ahl, HM3; Hattie B. Smith, NC.



WARD VISIT: Vernon A. Burkhart, Lieut., MC; Captain Chrisman; Ahl; Comdr. Burk; Miss Smith; Comdr. Thacker.



BETWEEN WARDS: Inspection party crosses patio.



CAPTAIN CHRISMAN: Visits old friend, Mrs. Margaret Bryan, widow of Captain Alanson R. Bryan, MC; her son, Comdr. Allen L. Bryan, is now serving in the Medical Corps, USN.



CAPTAIN visits patient in Female Medical Ward 15-2.

## RELIGIOUS LIFE

In making the change from civilian to military life, the Navy man does not leave behind the religious beliefs which he learned at home.

He is given every opportunity and encouragement to maintain and strengthen his religious interests. Each staff member and patient at this Hospital is given an opportunity to worship in his own faith.

In time of distress or personal emergency the Chaplains stand ready to give advice and counsel. Each man is en-

couraged to take his personal problems to a chaplain of his choice at any time.

The Chaplains' division maintains close contact with the Navy Relief Society and the American Red Cross in obtaining financial and other assistance for those in need.

Regular divine services are conducted by Chaplains, thus giving each man an opportunity to worship in accordance with his religious background, and present inclinations.





COMDR. GABRIEL J. BARRAS, CHC Senior Catholic Chaplain

LIEUT. ELVIN D. LEAVELL, CHC Senior Protestant Chaplain



ON CHAPEL STEPS—Top row: Lucian E. Hogan, Lieut., CHC; Robert B. Dunbar, Lieut. (j.g.) CHC; Jesse W. Thompson, Lieut. (j.g.) CHC; Anna K. Ball, PN2. Lower row: R. J. Pitois, HN; Elvin D. Leavell, Lieut., CHC; Gabriel J. Barras, Comdr., CHC; Arthur J. Wartes, Lieut., CHC; J. A.. Clark, PN3.



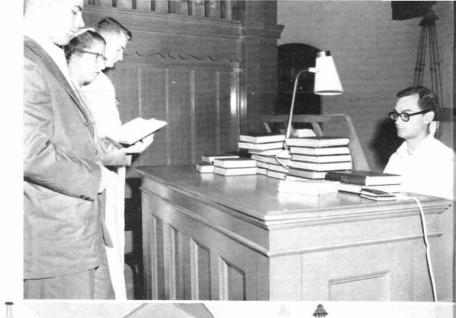
FILLING OUT QUESTIONNAIRE: R. E. Smith, AD1, Chaplain Arthur Wartes.



 $\ensuremath{\mathsf{GOOD}}$  NEWS?: Anna K. Ball, Chaplain's Assistant; J. W. Roscom, SN.

# CATHOLIC SERVICES

ORGANIST LEADS CHOIR PRACTICE IN CHAPEL.





CATHOLIC SERVICES in beautiful main Chapel at USNH San Diego.

# PROTESTANT SERVICES



WARD SERVICES: Chaplain Dunbar, Protestant.



ORGANIST: Loise J. Brown.



CHAPLAIN plays portable organ during services in surgery ward.



PROTESTANT SERVICES in USNH Main Chapel.

### RED CROSS

Pause for a moment while you look through these pictures and let your mind flash back 37 years to 1920.

As we stroll through the beautiful grounds of the hospital, admire the floral displays, the quiet patios and well-kept grounds, it seems incredible to think that only 37 years ago only 7 buildings were standing. The most recently constructed one was the Red Cross Building, built and donated to the Navy by the organization. Looking at the intense activity on all sides today, it is hard to believe that in the Red Cross Building in 1920, all activities took place. It housed the library and Red Cross offices as it does today; the Chaplains' offices, Special Services, tailor shop and library all had their headquarters here also. The Field Director, Mrs. Nelle Boud, who held this position for 25 years, was a familiar sight as she drove to serve the ships in the bay in her Model-T Ford.

Today all is changed. The hospital, composed of many buildings, reflects the expanded services of all its branches. Following the pattern, Red Cross, to meet the needs, enlarged and grew.

For better administration the activities of hospital Red Cross are divided into recreation and social service.

The social service program includes both Red Cross and Civil Service social workers. These people have definite ward assignments and give casework service to hospitalized servicemen, duty personnel and to dependents, both inpatients and outpatients.

One of the chief objectives of social service is to work with the hospital team in contributing to the patient's restoration to health and to his best possible personal and social adjustment.

Together with this, Red Cross is obligated by Congressional Charter "to serve as a medium of communication between the people of the United States and the Armed Forces." This implies certain responsibilities and covers the broad area of communications, counselling, financial assistance and personal services.

The purpose of Red Cross recreation is to provide a medically approved recreation program which is adapted to the interests of the patients. This program on the wards carries out individualized recreation for patients which includes parties, assisting with hobbies, teaching crafts, providing movies, etc.

In the Red Cross Lounge special recreation events are planned.

Volunteers work extensively in both Red Cross social service and recreation, and include such services as Canteen, Gray Ladies, Motor Service and Nurses Aides.



FIELD DIRECTORS: Margaret Eisenhardt, incoming; Mary Kelleher, outgoing.



RECEPTION INFORMATION: Mrs. Elsie A. Holland, Mrs. Emily C. Pribble.



ADMINISTRATIVE: Maurine Genzel, Recreation Superintendent; Mary Lou Warner, Assistant Superintendent; Miss Eisenhardt; Sumner Barckett, Casework Supervisor.



PROFESSIONAL—Top row: Mrs. Emily Pribble, Patricia Donovan, Ruth Mounts, Miss Brackett, Miss Eisenhardt, Gladys Madoff, Virginia Dietterle, Ivonne Hutchinson, Barbara Riley. Bottom row: Mrs. Elsie Holland, Mrs. Margaret Ellis, Mary Bricher, Mrs. Genzel, Mrs. Warner, Margaret Gray, Elaine Boehmer.



WARD SERVICE: Mrs. Yvonne M. Young, Gray Lady; M. Ferrina (patient).



ENTEROLOGY: Mrs, D. W. Atkinson, Volunteer Gray Lady; patient R. G. Smith, FN.



GRAY LADIES: Marie Sykora, Virginia Atkinson, Kathryn Kloss, Dorothy Chapman, Mr. George Mayes, Viola Maloney, Mildred Duncan, Florence Grando, Mary Jenison, Alice Keithly, Nora Riddell, Katherine Haley, Yvonne Young, Virginia Hall, Gladys Heyl, Hazel Dawson, Daisy Tunnock.



GRAY LADIES: Elizabeth Risberg, Madalan J. Arthur, Marta M. Rose, Hester L. Richardson, Lydia Busek. *Bottom*: Beverly Evans, Mildred F. Brown, Muriel Taylor, Patricia Farrell.



SURGICAL WARD: Mildred M. Pennepacker, Viola M. Maloney, Gray Lady Service Vice Chairman; Patient W. G. Martin.

## THE EXECUTIVE OFFICER

The Executive Officer serves as the direct representative of the Commanding Officer in coordinating the internal administration of the Hospital. All orders coming from him are regarded as emanating from the Commanding Officer.

The Executive Officer is also the Director of Clinical Services and as such is directly responsible for the administration and supervision as well as coordination of the professional functions of the Hospital. He also serves as Chairman of the Medical Library Committee and is responsible for the Library.

As Director of Clinical Services it is his responsibility to organize and coordinate the various clinical services to ensure the highest quality of medical care and the most efficient utilization of Medical Department personnel. He exercises general supervision over the care and treatment of all patients in the Hospital, both inpatient and outpatient, and he keeps the Commanding Officer informed of all patients on the serious and critical lists.

While executing the orders of or serving as the commanding officer, the Executive Officer takes precedence over all other officers attached to the Command. His primary function is to assist the Commanding Officer in the discharge of his responsibility for the professional care of patients and the training of the staff, in the formation of professional policies, standards and directives, and in the coordination of all internal administration of the Hospital dealing with professional matters.

The Executive Officer directs the Administrative Officer regarding matters of common interest and responsibility. Nothing in the regulations is to be construed as relieving the Executive Officer of his responsibility in matters under the purview of the Administrative Officer or of the necessity of keeping himself informed in such matters to the extent that he may be able to assume command in the absence of the Commanding Officer.

The Executive Officer is required to issue instructions for the guidance and administration of all patients, inpatients and outpatients, and designate the hours when visitors may be received; he coordinates the times for consultations and



EXEC'S PROFESSIONAL Assistant Miss Ardelle Petter



ADMINISTRATIVE: Ronald Schloer, HN; David Ramsey, HMC.



ADMINISTRATION: Don Adamson, HM2; F. L. Rust, HMC.

special examinations; he makes recommendations concerning the appointment to tumor board, boards of medical survey and clinical boards, the tissue committee, the medical records committee and such other boards and committees that have to do with patient care; he insures that the professional functions of the Hospital are carried on in such a manner as to merit accreditation by the various professional accrediting bodies; and he is required to organize a professional training committee from among the chiefs of the various clinical services, including the Administrative Officer, and serves himself as an active member of the committee representing the Commanding Officer whenever he is absent.

The training committee supervises and coordinates all of the training programs for medical officers and interns. He also makes recommendations to the Chief Nurse for the training of nurses, and to the Administrative Officer for the training of Hospital Corpsmen, and he arranges the schedule for all professional staff meetings, and coordinates the interservice conferences, ward rounds, seminars and consultant lectures.

The Executive Officer assigns staff officer personnel to those duties which will assure the most effective use of the officer's training and experience.



INSPECTION: USNH San Diego staff personnel fall in for inspection.



EXECUTIVE OFFICER Captain Morris Rubin looks them over



LIEUTENANT Fred Liedtke assists Captain Rubin at inspection,



PERSONNEL INSPECTION: Chiefs Parade Rest . . .



... Lieut. Comdr. Lucille R. Clark guides Waves ...



... Captain Rubin, Miss Clark ...



... Petty Officers, Attention! ...



... Front rank, Steady! ...



. . . Captain Rubin is pleased.

### THE ADMINISTRATIVE OFFICER

The Administrative Officer is responsible to the executive officer and commanding officer for all administrative matters, including the coordination of the internal administration of the hospital. All orders of the administrative officer are regarded as proceeding from the commanding officer, whose policies and orders he conforms to and effectuates. He advises the commanding officer and the executive officer regarding the nonprofessional functions and management of the hospital, and assists them in the formulation of administrative policies, standards, and directives. He acts independently on those matters which do not require the personal attention of the commanding officer or the executive officer, but he keeps them informed of the action which he takes. The Administrative Officer advises the executive officer regarding matters of common interest and responsibility. He exercises due caution to assure that all matters of a professional nature which require action and which may come to his attention are promptly referred to the executive officer.

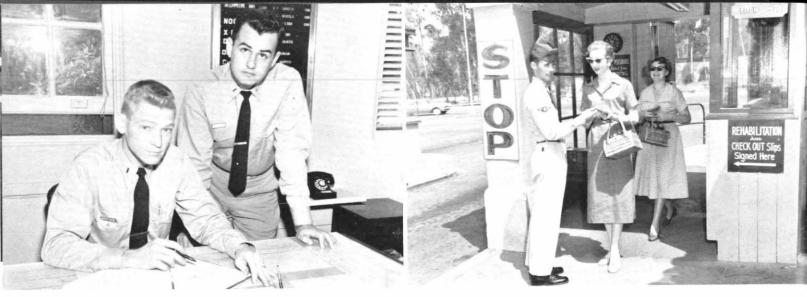
The Administrative Officer also is required to provide for the preparation, maintenance and promulgation of the directives necessary to meet the operating requirements of the Hospital; with the chief of the finance division and other appropriate officers, he formulates fiscal policies for presentation to the Command; he promulgates directives concerning safety measures; he sets the time for and takes charge of the weekly fire drill; he supervises the work of the Decedent Affairs Officer; subject to the approval of the Commanding Officer, he designates qualified personnel to prepare a curriculum for instruction of members of the Hospital Corps; and he serves as a member of professional training committee and provides organized instruction in hospital administration for Medical Service Corps and Hospital Corps personnel.

In addition to the foregoing, the Administrative Officer supervises the activities of boards of an administrative nature; supervises the assignment of nonprofessional personnel; makes recommendations concerning leave for administrative staff officers, and approves liberty lists for patient and staff personnel; he conducts, or has another Medical Service Corps Officer conduct, monthly inspections of the clothing of all enlisted personnel attached to the command; he is required to have general orders, orders from higher authority and all other directives which concern or are of interest to personnel of the Command, posted or otherwise brought to the attention of the personnel concerned, and he sees that copies of the Codé of Military Justice are made readily accessible to all personnel.

The Administrative Officer is required to insure that all infractions of law or U. S. Navy Regulations and violations of discipline are promptly reported to the Executive Officer and Commanding Officer.

Comdr. Charles F. Mann, Administrative Officer, receives a copy of the Study Guide for X-ray Technicians School from X-ray Technicians, John E. Daniels, HM1, Francis X. Abell, HM1 and Francis R. Ruml, HMC. Comdr. Mann graduated from X-ray Technicians School in 1927 and is probably one of the oldest X-ray technicians remaining on active duty.





OOD's: R. L. White, Ensign, MSC; R. J. Thompson, Ensign, MSC.

MAIN GATE: E. H. Nix, A3c, checks civilian identities.



PATIENT INFORMATION: W. T. Ridenhour, HM2.



ANSWERING QUERIES: Ridenhour and J. L. Thompson, HM2.



PATIENT INFORMATION STAFF: A. R. Wright, HN; R. H. Markhan, HA; J. W. Betts, HN; D. N. Norsworthy, HN; Riedenhour and Thompson, seated.



AIR FORCE LIAISON: J. N. Farmer, Captain, USAF, MSC; E. D. Schoepfer, M/Sgt., USAF.



MORE LIAISON: E. T. Mettile, A/2c; J. Mancari, S/Sgt.; E. K. Pfeffer, T/Sgt.; Master Sergeant Schoepfer, all USAF.



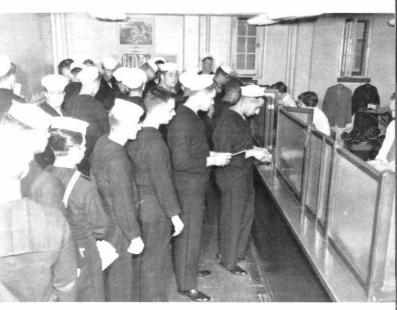
MARINE LIAISON: C. E. Lowe, Cpl.; D. H. Boyd, M/Sgt.; R. L. Wade, S/Sgt., USMC.



CREDIT UNION: Helen P. Crogan; Emma C. Graham.



BANK OF AMERICA: Lucy V. Goodman; Naomi R. Nash; Gladys E. Brooks; D. L. Steele.



PAY DAY at the Bank.

#### SURGICAL SERVICE

The General Surgical Service includes General, Cardio-Respiratory, Plastic, and Neurosurgery. The Department also has supervision and is responsible for the Anesthesiology Section, Oxygen Therapy, Central Sterile Supplies, the Operating Room Suites, Receiving Ward, Recovery Room, and the Tumor Board.

The Department is under the direct guidance of the Chief of Surgery. The hospital has been designated by the Bureau of Medicine and Surgery as a center for Cardio-vascular, Plastic Surgery, Oncological, and Neurosurgery. Consequently, there is a large variety of all types of surgical problems seen in the Department daily.

The Surgical Department is housed in the new modern building, consisting of a thousand beds, accommodating patients in all the surgical specialties. Each Service has open wards and private rooms. There is an adequate number of offices, dressing rooms, and treatment rooms located on each ward. There are 572 beds assigned to care of General Surgical patients.

Within the building, there are also the operating rooms, consisting of twelve operating suites; six anesthesia induction rooms; Cardio-Pulmonary Function Laboratory; a Tissue Bank; auxiliary X-ray facilities; observation rooms for monitoring instruments used during special types of surgery; Recovery Ward; Lecture Room; television viewing space; Morgue; Dictation Room; Receiving Ward; Central Issue Room for sterile supplies; sleeping spaces for doctors on watch; and dining spaces.

A well-equipped Animal Research Laboratory is available in another building, and all residents spend a part of their training in this section. There is a well-equipped and centralized Medical Library in which all up-to-date surgical literature is available.

The Chiefs of Services and Heads of Departments are, for the most part, Diplomates of their Specialty Boards. In addition, the Department has a number of well-known consultants who are leaders in their particular surgical specialty. The consultants are present for the following Departments: Gen-



CAPTAIN JOSEPH M. HANNER, MC, USN Chief, Surgical Service

eral Surgery, Anatomy, Oncology, Thoracic Surgery, Anesthesiology, and Neurosurgery.

The general function of the Surgical Service is to provide inpatient surgery and treatment for active service personnel, veterans, dependents, retired personnel and, when required, civilian humanitarian cases, In addition, consultants are provided for all departments of the hospital, as well as a number of Outpatient Clinics. Other responsibilities of the Department include the control and issue of supplies from the Central Issue Section; Oxygen Therapy; administration of the Receiving Ward; Training Program; Tumor Board; and Anesthesiology for all patients.

The Thoracic Surgery Department consists of 48 beds, of which 14 are in private rooms. Patients cared for on the Thoracic Service include officers, enlisted personnel, veterans, retired individuals, and dependent females and children.

The Department is assigned two operating rooms in the main operating suite. These two rooms are especially designed and equipped with special devices necessary to chest surgery. In addition, there is a large space adjacent to these two rooms which is equipped with monitoring devices pertinent to pulmonary and cardiac surgery. Also, a fully equipped Cardio-pulmonary Function Laboratory and Tissue Bank are



CAPTAIN HANNER Conducts Surgical Conference—Front row: Captain John W. Koett; Herbert W. Meyer, MD; Captain Victor C. Stratton; Captain James Crawford; Second row: Captain Robert C. Ray; Ernest J. Penka, Lieut. Comdr.; Richard B. Sarver, Lieut. Comdr.; Jerome A. Golden, Lieut.; Third row: Tae H. Kang, Lieut. (j.g.) ROKN; Donald C. Colter, Lieut.; Edgar E. Thomas, Jr., Lieut. Comdr.; Charles G. Spradley, Lieut.; Donald R. Dicus, Lieut.

located by the main operating suites. An Animal Laboratory is available where research problems are conducted.

Emphasis is placed on a Heart-Lung Apparatus which is used in the cardiac surgery section. The pump oxygenator has created a number of research problems which are pertinent to the department, and are important in future control of cardiac surgery. As a center for pulmonary and cardiac surgery, major clinical problems in pulmonary and cardiac pathology are referred here from various areas in the United States and the world.

The Plastic Surgery Department consists of 40 beds. The Department has excellent facilities to diagnose and treat all types of Plastic Surgery cases of male enlisted personnel. Separate facilities are available for hospitalization of pediatric, female, and officer personnel cases. Surgical procedures are carried out in the main operating suite four days a week, with an average of 75 to 80 operations per month. Minor surgical procedures are scheduled twice weekly and are carried out in the treatment room on the Plastic Surgery ward. The Outpatient Clinic consultations are held twice weekly and average approximately 100 to 110 patients monthly.

The Neurosurgery Department consists of 88 beds in ward spaces and 16 beds in private rooms. The Department is well-equipped and has facilities for all types of neurosurgical cases. Full equipment is present for all diagnostic procedures relative to neurosurgical problems. As the hospital is a center for Neurosurgery, many cases are transferred here from nearby and far activities which provides the Service with a large variety of all types of cases. Many clinical research problems result from such a large variety of cases, hence,

several hours weekly are devoted by the staff in the Animal Research Laboratory.

The Training Program includes training of the interns on a rotational pattern, and an organized program for a four year residency. The Surgical Service for the interns includes sixteen weeks, in which the individual has experience and training in Urology, Orthopedics, Ophthalmology, Otolaryngology, but the major emphasis is placed upon General Surgery. It is desired that the individual learn sufficient surgical technique to enable him to successfully cope with common emergencies. The intern training includes instruction and experience in Anesthesiology.



SECRETARIAL GROUP: Shirley F. Johnson; Rita A. Laferriere; Ardelle M. Petter (supervisor); Aileen M. Eaton.

The objective in the Residency Training Program is to develop medical officers in the field of General Surgery so that they may be capable of performing adequate surgical treatments when necessary in any future duty assignments. In addition, it is the purpose of the Department to prepare and train candidates for examinations for certification by the American Board of Surgery, and for membership in the American College of Surgeons. The program has been approved by the American Board of Surgery, and it fulfills all requirements for certification.

The Teaching Program centers around the Ward Medical Officer, who is under the direct supervision of the Chief of Surgery. The Training Program of each resident conforms to the requirements of various specialty Boards, the Council on Medical Education and Hospitals, the American Medical Association, and the American College of Surgeons. The residents are rotated every three months, during the four year program, to provide full participation in all surgical departments in related activities. Basic Science lectures and laboratory work are given as fundamental in General Surgery.

In each branch of the Department training is given in surgical diagnostic procedures, pre- and post-operative care, and operative techniques. When the resident is deemed capable, he is allowed to perform surgical procedures commensurate with his skill and experience, under the supervision and with the assistance of a trained surgeon. The plan is for the work and responsibility of the resident in each succeeding year to correlate with that of the preceding year, and for the nature of the work to be of progressive character and type. All residents attend organized conferences and clinics.

Clinics held weekly include Tumor Boards, General Surgical Conference, Basic Science Lectures, Clinical Pathological Conferences, Staff Meetings, Gastrointestinal Conferences, and Surgical Grand Rounds.

Each resident, when reporting to duty, is encouraged as soon as possible to select a topic for research, which may be clinical, or one that is conducted in the Animal Laboratory. The results of the research are usually presented in a written thesis which, in most cases, is published, and presented to local and national surgical organizations.



TUMOR BOARD: Dr. Franklyn Hankins, MD (civilian consultant); Captain Gorman, MC; Captain Joseph M. Hanner, MC (chairman); Captain George Meador, MC; Captain Koett, MC; Dr. Herbert Meyer, MD (civilian consultant).



OPERATING ROOM SUPERVISOR Lieut. Comdr. Edna M. Daughtry, NC.



MAIN SURGERY: J. G. Hunt, HM3; Alberta F. Stafford, Lieut. Comdr., NC; L. L. Hudspegh, HM1.



 $\mbox{ANESTHESIA: William J. Gallagher, Lieut. Comdr., Chief of Department; W. R. Carter, HN. }$ 



SCRUB ROOM: Richard H. Sarver, Lieut. Comdr., MC; F. L. Perrier, HN.



GENERAL VIEW of operation.



ABDOMINAL Surgery in progress.



WORKING ON animal in Surgery Research laboratory.



HEART and Lung Machine in use.



CENTRAL SUPPLY: Julia E. Scarcello, Lieut., NC; C. D. White, HN.



INSTRUMENT ROOM: G. B. Gionet, HM3.



PACK ROOM: J. D. Gormley, HM3.



EMERGENCY: Antoinette Kotch, Lieut. (j.g.), NC; Robert Rogers, HN; James Register, HN; Gerald Verzal, HN.



RECOVERY WARD: Norman B. Cooley, Jr., Lieut., MC; Gloria Holko, Ensign, NC.



NURSES STATION: Miss Holko; David Simmons, HN; Louise Dias, Lieut., NC; Albert Davis, HN.



GENERAL VIEW: Recovery Ward.



### PLASTIC SURGERY



CAPTAIN JAMES CRAWFORD, MC, USN Head, Plastic Surgery Assistant Chief, Surgical Service



TUMOR BOARD—Left to right: Captain John Gorman, MC (Medicine); Captain Crawford, MC (Plastic Surgery); Captain John Shaver, MC (Pathology); Captain John Koett, MC (X-ray); Lieut. Robert Visscher, MC, presenting case.



PLASTIC SURGERY: Don D. Floan, HN; Captain James Crawford, removing keloid.



NASAL PACK REMOVAL: V. L. Gibbins, HN; Allen R. Botimer, Lieut., MC.



RETURN TO WARD: Patient G. P. Oliveria, MM1, returns from OR; C. O. Surrett, HN; R. L. Barth, HN; J. D. Gromley, HM3; L. E. Walden, HA; V. L. Gibbins, HN.



WARD 26-5A: Gibbins; Ethel M. Weik, Lieut. Comdr., NC; R. L. Barth, HN; Floan.

### **NEUROSURGERY**



CAPTAIN WILLIAM J. JAMES, MC, USN Head, Neurosurgery



Captain William J. James, MC, and Marjorie Johnson, Secretary.



SICK CALL: Lieut. Paul Mabie, MC; Lieut. Comdr. Ernest Penka, MC; Captain James; Lieut. Comdr. Benjamin Crue, MC; Ensign Joanne Sides, NC; Lieut. Comdr. Betty Ruppert, NC.



 $\operatorname{SICK}$  CALL: Lieut. Comdr. Penka; Lieut. Comdr. Crue; Lieut. Comdr. Ruppert.



SICK CALL: Lieut. Comdr. Crue; Lieut. Mabie; Lieut. Comdr. Ruppert; Lieut. Comdr. Penka.



PATIENT CARE: J. T. Stone, HN; E. S. Sanshu, HN; C. O. Robbins, HN; J. J. Nickles, Jr., HN; L. G. Smith, HN; Ensign Joanne S. Sides, NC.

### **PROCTOLOGY**



CAPTAIN GEORGE M. LYNCH, MC, USN Head, Proctology



PROCTOLOGY WARD: Captain Lynch; Lieut. Norman Wenger, MC; Lieut. (j.g.) Marie Simmons, NC; Lieut. Willard Larson, MC; Harvey McDonald, HN; Floyd Smith, HN; Milton Minder, HN.



SICK CALL: Captain Lynch; Lieut. Wenger; Lieut. Larson; McDonald; Smith; Minder.



PROCTOLOGY: Earl McCann, HN; Lieut. Jack Saglio, MC; Lieut. (j.g.) Ethel Hillin, NC.



LANCING BOIL: Lieut. Willard Larson, Milton-Minder, HN; Harvey McDonald, HN; Floyd Smith, HN.



NURSES STATION 26-4C: J. G. Greene, Bm1; W. J. Dourney, CS3; Lieut. Comdr. Julia Sagawe, NC; Lieut. (j.g.) Marie Simmons, NC; C. A. Boling, HN.



NURSES STATION 26-4C: M. J. Maciejewski, HA; A. M. Minder, HN; J. R. Hall, HN; Lieut. (j.g.) Stella Hardesty, NC.



PROCTOLOGY WARD 26-4C: Miss Hardesty, Maciejewski; A. R. Castaneda (patient).

### SURGERY DEPENDENTS



CAPTAIN VICTOR C. STRATTON, MC, USN Head, Dependents and General Surgery



NURSING SUPERVISOR BUILDING 26 (SURGERY): Lieut. Comdr. Phyliss Bohnhoff, NC; Edward Sallee.



SICK CALL: Lieut. Spencer F. Maddox, Jr., MC; Lieut. Comdr. William Adams, Jr., MC.



WARD 26-5C: Lieut. (j.g.) Dorothy Effner, NC; Ensign Angela Burgad, NC; Lydia Masek (patient).



SURGICAL WING: Anne A. Ambrose, Lieut. Comdr., NC; Julia M. Sagawe, Lieut. Comdr., NC.



WARD 26-5D: Patricia J. Grote, HN; Betty L. Leslie, HN; Lieut. Leonie Guenther; Kathiern B. Akers, Pvt. (USA) (patient).



NURSES STATION WARD 26-5C: Dorothea G. Kilpatrick, (civilian); Lieut. (j.g.) Patricia Slater, NC; Ensign Vickie Harker, NC; Lieut. (j.g.) Dorothy Effner, NC.



NURSES STATION: Lieut. (j.g.) Catherine B. Fischer, NC; Ensign Lorraine Ransom, NC; Ensign Joann P. Kelly, NC.

## GENERAL SURGERY



SICK CALL WARD 26-1-B: Lieut. (j.g.) Dolores Lynch, NC; Lieut Comdr. Norman Cooley, MC; Lieut. George Fairfax, MC; Lieut Orr, MC; Lieut. Buell Cole, MC.



PATIENT CARE WARD 26-1-B: H. T. Beatty, HN; Lieut. Comdr. Leara B. Liebman, NC; H. W. Washburn, HN; Lieut. Comdr. Sagawe, NC; T. J. Gallo, HN; S. Schreiner, VAB (air force)



NURSES STATION WARD 26-1-B: Beatty, HN; Washburn, HN; Gallo, HN; E. Alvidrez, HN; T. R. Brenne, HN; Lieut. Comdr. Leara Liebman, MC; Lieut. (j.g.) Dolores Lynch, NC.



PATIENT CARE WARD 26-1-B: E. L. Sallee, HN; J. L. Edwards, HN; C. Seaman (patient); M. L. Riggins, HN.



INHALATION THERAPY WARD 26-1-C: Alvidrez, HN; Schreiner.



LIEUT, COMDR. EDGAR THOMAS, MC, Ward Medical Officer 26-1-C and D.



SICK CALL: Lieut. Comdr. Edgar Thomas, MC; Lieut. Stanley Payne, MC; Lieut. Tae Hyon Kang, MC (Korean); Lieut. Donald Colter, MC.



SICK CALL WARD 26-1-C: Lieut. Colter; Lieut. Payne; Lieut. Comdr. Thomas.



SICK CALL WARD 26-1-C: Ensign Judy Eikermann, NC; Lieut. Payne; Lieut. Comdr. Thomas.



WARD 26-1-C: Corpsmen on job.

# SOQ SURGERY



CAPTAIN ROBERT C. RAY, MC, USN Head, Sick Officers' Quarters (Surgery)



CONFER: Lieut. Comdr. Sarver; Captain Ray.



SICK OFFICERS' QUARTERS SURGERY: Captain Ray; Lieut. Comdr. Sarver; Lieut. (j.g.) Albina Gustaitis.



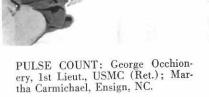
SICK CALL: David Wakefield, HN; Lieut. (j.g.) Margaret Tranchard, NC; Captain Ray; Lieut. Comdr. Sarver; Marlin Kelly, HN.



RETIRED ARMY Captain gets attention: Ginny Johnson, Lieut. (j.g.), NC; David E. Wakefield, HM3; Corpsman Miller.



E. L. Gonzales, HN; R. E. Bunch, HN; Barbara J. Foppiano, Lieut. (j.g.), NC; Joyce K. Miller, Ensign, NC; C. D. White, HN.



### THORACIC SURGERY



CAPTAIN JAMES KAUFMAN Head, Thoracic Surgery



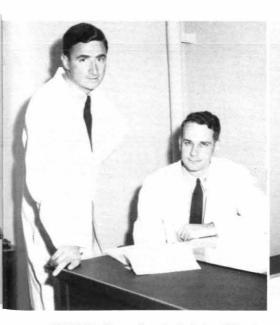
TURKISH SURGEON HONORED: Comdr. Cemil Aksoy, Turkish Navy presidential exchange student, hands piece of his "farewell cake" to Captain Chrisman on eve of his departure home. Left to right: Captain Hanner, Lieut. Sedwitz, Comdr. Whatley, Captain Ballanger, Captain Kaufman.



FAREWELL: Turkish Navy Comdr. Aksoy divides his farewell party cake with Patricia M. McLain, Lieut., NC. Captain Chrisman, Ballenger and Miss B. A. Thomas wait their turn.



CAPTAIN KAUFMAN and his secretary, Miss Chiyeko Sugiyama.



CONFER: Lieut. Joseph Sedwitz, MC; Captain Kaufman.



RESIDENT: Captain Felix P. Ballenger.



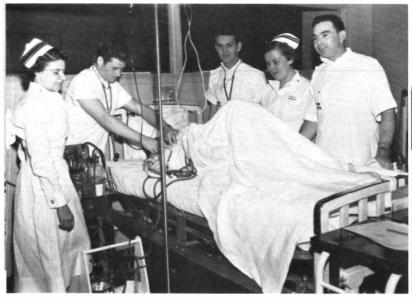
Joseph L. Whatley, Comdr., MC.



NURSES STATION WARD 26-5-A: D. C. Bush, HA; D. L. Hill, HN; S. J. Garcia, HN; Lieut. Lyle Niederbaumer, NC.



NURSES STATION WARD 26-5-B: Lieut. (j.g.) Lorene James, NC; Lieut. Patricia M. McLain, NC.



PATIENT CARE WARD 26-5-B: Lieut. (j.g.) Faye E. Fisher, NC; E. Hoffman, HN; R. A. Payne, HN; Ensign Joann Kelly, NC; A. M. Sanchez, HN; J. J. Ogrodowicz (patient).



NURSES STATION WARD 26-5-B: Sanchez; Payne; Hoffman; Ensign Kelly; Lieut. (j.g.) Fisher.



PATIENT CARE WARD 26-5-A: Lieut. (j.g.) Mary Crowley, NC; C. E. Jarrett, HN; J. A. Dehlsen (patient); D. L. Hill, HN.



Hoover, R. A., HN, and Fowler, D. J., HN, prepare Spinal, bracial blocks and epidural sets, for anesthesia before surgery.

#### MEDICAL SERVICE

The Department of Medicine is divided into the following divisions: General Medicine (nine wards); Sick Officers' Quarters (Medicine); Cardio-Vascular Service (Heart Station and Cardio-Pulmonary Function Laboratory); Allergy Service; and Radioactive Isotope Laboratory.

The Medical Service is composed of wards and clinics in which patients with general medical diseases are cared for. These diseases, broadly speaking, are those in which no surgical treatment is indicated. Included are pneumonia, the contagious diseases, leukemias, kidney diseases, ulcers, heart disease, hypertension, and diabetes. There is one ward set aside for the care of women with these diseases. Approximately 25 per cent of the patients hospitalized are cared for by this service.

Among the specialized branches of the Medical Service are the Cardio-Vascular Service and the Allergy Service.

Under Cardio-Vascular is the Heart Station located on the 4th deck of Building 9. Here, all outpatients and inpatients with cardiac disease or hypertension are studied. Diagnosis is established and recommendations as to treatment made, to be carried out by the referring physician, or by the members of the Heart Station itself. It is in this station that the electrocardiograms for the entire hospital are performed. At the present time, approximately 1700 electrocardiograms are performed by the Heart Station per month.

The Cardio-Pulmonary Function Laboratory is equipped to measure the breathing function of patients referred for such examination. In addition, this laboratory performs the cardiac catheterizations for the entire hospital. At the pres-



CAPTAIN JOHN E. GORMAN, MC, USN Chief Medical Service

ent time, one to two cardiac catheterizations are performed each week. It is by means of these catheterizations that diagnostic studies are performed to allow diagnosis of various cardiac disabilities, and determinations made as to the advisability of surgery in these cardiac cases.

The Allergy Service sees approximately 765 patients each month. The Service performs tests for the diagnosis of various allergies, and upon the establishment of the diagnosis as to the causative agents of various allergic diseases, manufactures extracts and administers them to patients.

The Endocrinology and Radioactive Isotope Laboratory supervises the treatment of patients with diseases of the endocrine glands. This includes patients with thyroid disease, disorders of the adrenal glands, and patients with pituitary abnormalities. In addition to the care of these patients, this Laboratory supervises the administration of radioactive isotopes for the diagnosis and treatment of various disorders. The chief radioactive isotopes in use at the present time are Iodine 131, Phosphorus (P-32), Gold (AU-198), Iron (Fe-59), Radium (Ra-226), Chromium (Cr-51), Yettrium (Y-90), Cobalt (Co-60).

# SICK OFFICER QUARTERS



CAPTAIN FRANCIS G. SOULE, JR., MC, USN Officer in Charge



SOQ SECRETARY: Nixie S. Kern



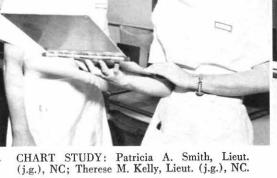
SOQ CONSULTATION: Roy G. Brown, Comdr., MC; Erwin L. Burke, Lieut., MC.



SICK CALL: Irene Sullivan, Lieut., NC; Eldon Evans, Lieut., MC; John Country, Comdr., MC.



RETIRED SECTION: Eleanor Stein, Lieut. (j.g.), NC; Miss Sullivan, Lieut. Evans.





NURSES STATION: Frank More-house, HN; Anna C. Olund, Lieut., NC; Miss Sullivan.

### HEART STATION



CAPTAIN LOUIS R. GENS, MC, USN



HEART STATION: Willis S. Myers, Lieut. Comdr., MC.



CARDIOGRAPH: J. L. Edwards, HN; R. C. Stonge, HM1; Barbara J. Vilt, HM1.



EXAMINATION: J. W. Reid, HN; Bruce B. Barnhill, Comdr., MC; C. A. Gilliam, HN.



HEART CHECK: L. A. Robinson, HA; Edmonston F. Coil, Lieut., MC; Patient R. E. Uptain, EM1.



NURSES STATION: M. C. Ullery, HN; L. A. Robinson, HA; Barbara R. Matuszewski, Ensign, NC.

# CARDIAC CATHETERIZATION



Elvin Kithens, HN, lays out instruments for Cardiac Catheterization operation.



Captain Felix B. Ballenger, MC, shown preparing to make "cut-down."



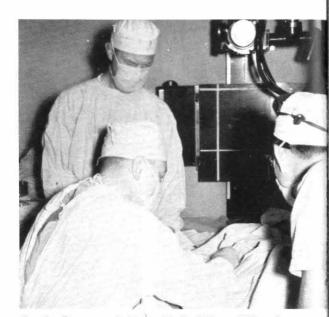
Another view of Captain Ballenger at work. Here he is making "cut-down" prior to operation. Comdr. Arthur J. Draper stands by.



Lieut. Comdr. Willis S. Myers, MC; and Comdr. Draper assist Captain Ballenger.



Here L. W. Bowers, HN; and A. K. Weideman, HM2, determine O2 and CO2 content of blood.



Comdr. Draper and Lieut. H. L. Eckert, MC, take blood sample to determine patient's condition. Cap-tain Ballenger watches.



 $\begin{array}{cccc} {\rm Corpsman} & {\rm Bowers} & {\rm operates} & {\rm cardiac} & {\rm catheterization} \\ {\rm machine.} \end{array}$ 

# CARDIAC WARD



WARD MEDICAL OFFICER Harold A. Davis, Comdr., MC; Herbert R. Brown, Jr., Lieut., MC.



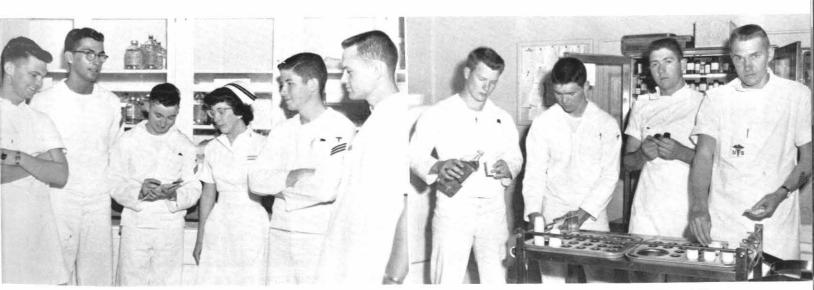
BEDSIDE CONFERENCE: Charles A. Camarata, Lieut., MC; Coral A. Snodgrass, Ensign, NC; Deloras Mathowitz, Ensign, NC.



CARDIAC: R. Martin, HN; Edwina Cordell, Lieut. (j.g.), NC; J. Powell, HN.



CASE DISCUSSED: Miss Cordell; Lieut. Camarata; patient I. N. Pelkey, Lieut. Fagin.



CORPSMEN Walters, Martin, Powell, Ensign Snodgrass, Davis, and Tucker.

CORPSMEN Cooper, Sims, Shepard, Olson.

### MEDICAL WARD



METABOLIC: John W. Cox, Lieut. MC; Captain Victor C. Stratton, MC; Norene E. Jung, Ensign, NC.



PAPER WORK: Constance Wolff, Lieut, (j.g.), NC.



BEDSIDE AID: Miss Jung; W. L. Day, HN.



DISCUSS CASE: Charles E. Henderson, Jr., Lieut., MC; Paul B. Welty, Jr., Lieut., MC; John W. Cox, Lieut., MC.



CHART RECORDING: W. L. Day, HN; R. K. Morton, HN; H. A. Maxey; Emily E. Guillotte, Lieut. (j.g.) NC.



ULCER PATIENT: Y. K. Liang, Lieut., MC, Chinese Navy; William M. Voss, Lieut., MC; J. Wahl, Lieut. (j.g.), MC; Miss Guillotte.



GASTROENTEROLOGY: David R. Downs, Lieut., MC; Theodore J. Cosgrove, Lieut., MC; Olive M. Wilkinson, Lieut. Comdr., NC; M. H. Spensley, HN.



CHART ENTRIES: M. H. Spensley, HN; L. F. Charlton, HN; Albina B. Gustaitis, Lieut. (j.g.), NC; A. D. Gordon, HN.



BANDAGING: E. Cisneros, HN; Lieut. Cosgrove.



CORPSMEN LISTEN: R. R. Sorrels, HN; R. R. Marshall, HN; Jeanette M. Morgan, Ensign, NC; D. G. Cox, HN.



MEDICINE CART: Corpsman Cox and patients.



PNEUMONIA WARD: Corpsmen J. C. Jones, W. P. McMurry, P. D. Barton, D. W. Long.



NURSE EXPLAINS: Ann M. Wheeler, Ensign, NC; Corpsmen Brown, McMurry, Tyler, Heath, Davis, Helt, Wheeler.



CONTAGIOUS WARD: M. K. Fisher, Lieut., NC; H. L. Parks, HN; R. A. Burningham, Lieut., MC; R. W. Roberts, HN; J. W. Alford, HN.



RECORD KEEPING: Elizabeth M. Wilson, Lieut. (j.g.); Corpsmen Alford, Long.



CAPTAIN R. F. FAUCETT, MC, USN Dependents' Medicine



 $\rm SICK$  CALL: Doctors Faucett, Voss, Evans and Welty with Miss Bynum, Ensign, NC.



CONSULTATION: Doctors Faucett, Welty, Voss, Evans, with H. B. Smith, Lieut. Comdr., NC.



CHARGE and JUNIOR NURSES: Pat Jacks, Lieut (j.g.), NC; Adele Gambel, Lieut. (j.g.), NC.



CHARGE NURSE Gambel instructs in use of oxygen equipment. Listening are Ruby Nickelson, Mary Ciley, Inez Lackey.



SET FOR INSPECTION: Annie Lenorr, Leona Traylor.

FEMALE Medical Ward.

### RADIO ISOTOPE LABORATORY



CAPTAIN HARRY A. WEISS, MC, USN Officer in Charge, Radio Isotope and Endocrine Laboratory



RADIO ISOTOPE LAB: Lieut. (j.g.) Grimaldi.



RECEIVING DESK: G. H. Andrews, HM3; Patient Mrs. A. McGinnis.



RADIO ISOTOPE SCHOOL: J. M. Johnson, HM2; D. L. Hall, HM3; J. J. Roche, HN; Ruth A. Willburn, HM3; Judy C. Ebsen, HN.



ENDOCRINE LAB: R. M. Codding, HM2; J. S. Bailey, HM2.



SCINTISCALER: C. L. Young, HM2; patient Sherrie H. Wyse.



DILUTION ROOM: B. R. Creech, HM1; M. H. Olds, HM2.



SCINTISCANNER: M. G. Kellar, HM3.



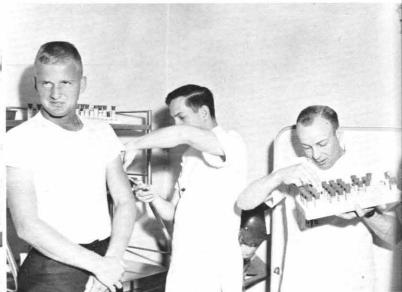
INDUSTRIAL HEALTH: Henry A. Sparks, Lieut. Comdr., MC.



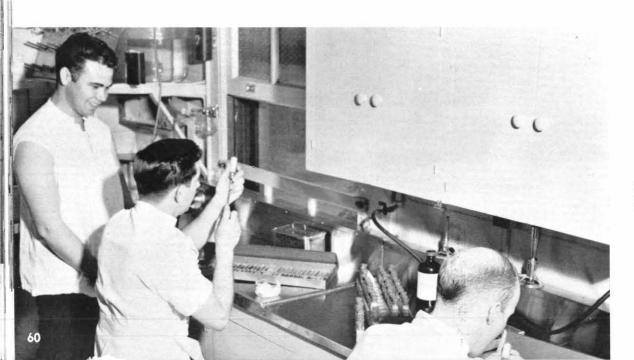
PHYSICAL EXAM: A. L. Pumilia, J. C. Hoenstra, H. S. Swain, Charlie Brown, all HN's, and Mickey W. Moore, HM1.



ALLERGY CLINIC: J. A. Tremer, HN.



J. A. Tremer, HN, and V. W. Thomas, HN, administer allergy desensitizing injection.



Just the Right Amount: G. A. Dwiggins, HN, and J. A. Tremer.

#### UROLOGY SERVICE

The Urology Service provides and coordinates services relative to the examination, diagnosis, management and disposition of the patients with disorders of the urinary and male genital tracts. It is divided into a Clinical Branch and an Instruction Branch.

The Clinical Branch is required to staff and equip facilities to manage inpatients with any type of urology disorder; it manages an outpatient clinic, and provides consultation service for other Services in the Hospital. The branch also maintains cystoscopic examining rooms and radiographic facilities for diagnosis and treatment of urological disorders. It also staffs and equips a room in the main operating suite where all types of urological surgery are handled.

The Instruction Branch provides a training program for residents. This Branch maintains a liaison with civilian consultants and other urologists, and provides instruction and practical experience in urology for internes.

The residency program consists of one year in general surgery and three years of urology proper. An additional two years of full-time practice in urology must be completed before a candidate may apply for the American Board of Urology examination.

Urology technicians are essential to a proper functioning service. They perform many extremely important tasks such as taking X-rays, developing film, setting up the operating and cystoscopic rooms, assisting in surgery and performing laboratory tests. They contribute greatly to the success of the service. Their period of training is six months, and those



CAPTAIN JAMES R. DILLON, JR., MC, USN Chief, Urology Service

that pass all examinations are designated as URT's.

The Urology service is the largest military or federal urology unit. It is an excellent teaching facility because of the large source of patients in the two age groups requiring most care, namely, the retired population, the Naval Training Center and Marine Corps Recruit Depot.

Some of the figures showing the volume of work accomplished during the last year are as follows:

Hospital admissions	1,404
Average daily patient census	72
Major operations	377
Minor operations	4,144
Intravenous pyelograms performed	2,521
Cystoscopies	1,466
Outpatient consultation	7,219

The Urology staff and patients are greatly indebted to the very capable service rendered by the members of the Nursing Corps on duty in the clinic and the wards. A great many of the urology patients are elderly, requiring a large amount of extra nursing care. The patients are given everything possible to facilitate their comfort and recovery.

LUCILLE PARSONS
Secretary for Urology Service



UROLOGY CONFERENCE — Left to right: Cdr. Edwin C. Sweeney, MC; Dr. Ector LeDuc, MD (civilian consultant); Captain Dillon; Lt. W. E. Cowell, MC; Captain Blake Talbot, MC.



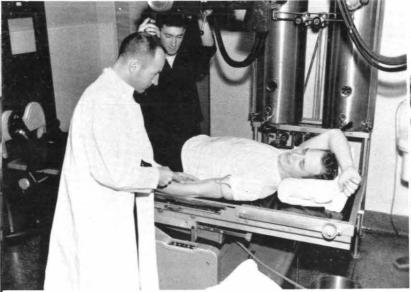
UROLOGY CONFERENCE — Left to right: Captain Dillon; Ralph B. Mullenix, MD (civilian consultant); Captain Talbot.



UROLOGY CONFERENCE — Left to right: Comdr. Sweeney, MC; Dr. Ector LeDuc, MD (civilian consultant); Captain Dillon.



CYSTOSCOPY: Lt. Rex Orr, MC; R. W. Malone, HN (patient).



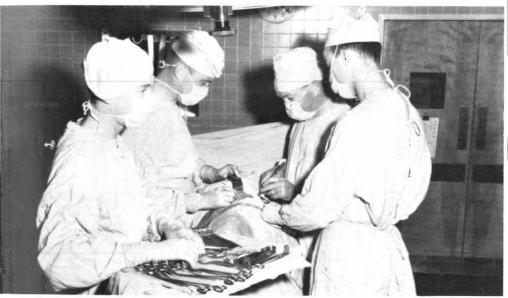
INTRAVENOUS PYELOGRAPHY: Lt. W. E. Cowell, MC; K. B. Jacobs, HM3 (patient).



CORPSMEN — Left to right: W. Honeycutt, HN; W. R. Rose, HN; K. B. Jacobs, HM3; R. Biggs, HN; J. Hendricks, HN; N. Jones, HN.



NEPHRECTOMY (KIDNEY REMOVAL): R. D. Biggs, HN; Comdr. Sweeney; Captain Dillon; Lieut. Orr.



 $\mbox{NEPHRECTOMY} - \mbox{\it Left to right:} \mbox{R. D. Biggs, HN; Comdr. Sweeney; Captain Dillon; Lieut. Orr.}$ 



NEPHRECTOMY: R. D. Biggs, HN; Comdr. Sweeney; Captain Dillon; Lieut. Orr.



 $\begin{array}{lll} {\rm NEPHRECTOMY} & - & {\it Left \ to \ right:} \ {\rm Biggs, \ HN;} \\ {\rm Comdr. \ Sweeney;} \ {\rm Captain \ Dillon;} \ {\rm Lieut. \ Orr.} \\ \end{array}$ 

MINOR SURGERY — Left to right: Lieut. Orr; Honeycutt, HN.



NURSES STATION WARD 4-B — Left to right: Lieut. Beverly Rambo, NC; J. Ehlers, HN; D. A. Brown, HN; B. M. Ferris, HN (seated).



SICK CALL WARD 4-B — Left to right: Lieut. Cowell, MC; Jack Ehlers, HN; Lieut. Beverly Rambo, NC.



WARD 4-B —  $Left\ to\ right$ : Harris Green, HN; James Cherry, HA; Ensign Miriam Throyer, NC.



MEDICATION ROOM — Left to right: Lieut. (j.g.) Kathryn Yucha, NC; Don Winkler, HN; Ensign Doris King, NC.



NURSES STATION — Left to right: Ensign Throyer; Winkler, HN; Brown, HN.



WARD CANTEEN SERVICE — Left to right: Charles Freeman, HN; Ray Chrisman, SH1; Frank Combs, Pvt. (USMC); Vic Reinhardt, PHG-2; Ensign Barbara Fox, NC.



APPOINTMENT DESK — Left to right: Lieut (j.g.) Bertha Liberatore, NC; Roger Lachance, HN.



DEPENDENT CYSTOSCOPY CLINIC: Patients waiting for Cystoscopy as part of diagnostic work up.



CONSULTATION — Left to right: Lieut. (j.g.) Liberatore; Captain Talbot; Johanna Sumner (patient).



 ${\it CLINIC-Left\ to\ right:}$  Selmer Griffiths, HM1; Captain Talbot. Urinalysis and clinic work up.



INTRAVENOUS-PYELOGRAPHY — Left to right: Griffith, HM1; Honeycutt, HN; Lieut. (j.g.) Liberatore; Lieut. Cowell; Harriet Christy (patient).

#### NEUROPSYCHIATRIC SERVICE

In 1949 the Neuropsychiatric Service of the U. S. Naval Hospital, San Diego, California, became a separate and distinct Service, the Chief of the Service reporting directly to the Executive Officer and the Commanding Officer of the hospital.

The Service is divided into three Branches, Psychiatry, Neurology and Clinical Psychology.

Throughout the many years that the Service has been in existence, the physical facilities for the housing of the patients have been scattered over the Compound and the services provided have been varied. This was dependent upon the rise and fall in the patient census during the two major armed conflicts of recent years. It was not until January, 1958, that the Neuropsychiatric Service was able to be housed under one roof, the 36 Building at the south end of the beautiful lower patio.

This move of the scattered facilities into the building brought about a centralization of the Neuropsychiatric administrative offices, an admission ward, the closed wards, the Neurology Clinic and wards, the Electroencephalography section, the convalescent and rehabilitation psychiatric wards, the offices of Clinical Psychology, and also made possible space for occupational therapy in the building, as well as a conference and study room for the Neuropsychiatric professional staff.

The Neuropsychiatric Service at this hospital is charged with providing a diagnostic and testing service, the care, custody, treatment and disposition of patients with mental or emotional disorders and nervous system diseases.

The Psychiatric Branch of the Service specifically provides observation, care and treatment of mental and emotional disorders, including the functional and organic psychoses, the psychoneuroses, the character and behavior patterns, disorders of intelligence and transient personality disorders. An open admission ward, as well as a maximum security psychiatric ward are maintained for observation, care and treatment of all patients admitted with a psychiatric diagnosis. A graduated open ward environment and a rehabilitation program are maintained for patients recovering from acute psychiatric disorders. Patients who are in need of prolonged specialized treatment are transferred to the designated Special Psychiatric Treatment Centers.

The records of patients not being returned to duty are processed to appear before an appropriate Medical Board with the proper recommended disposition. A Neuropsychiatric Record Office is maintained for preparation of medical records and the necessary reports.



Captain Robert L. Wagner, MC, USN, dictating to Miss Gladyce England (Secretary).



CAPTAIN ROBERT L. WAGNER, MC, USN Chief, Neuropsychiatry Service

The Neurological Branch provides diagnoses, observation and treatment for all patients with organic diseases of the nervous system other than those considered Neurosurgical or Medical, and the Clinical Psychology Branch administers, interprets and reports the psychological tests for diagnostic purposes.

The Electroencephalography Laboratory is a function of the Neurology Branch and is supervised by the Head of Neurology. An Electroencephalography School is operated for the instruction of technicians in this specialized field, and graduates such technicians every four months.

The rehabilitation program for the patients admitted to the Neuropsychiatric Service makes full use of many of the facilities available on the Compound. One such is the Occupational Therapy Department, whose technicians visit and bring to the Neuropsychiatric wards a stimulating variety of crafts.

The recreation program is pushed to the maximum with the arts and crafts, movies, television, music, games, and specially arranged entertainment programs by volunteer organizations.

The physical education facilities are provided by Special Services of the hospital and include touch football, swimming and bowling. There has been a steady and progressive move toward the establishment of the newer concepts in psychiatric therapies.



DIAGNOSTIC STAFF CONFERENCE — Left to right: Lieut. S. P. Bucksbaum, MC; Lieut. A. C. Finger, MC; Lieut. R. H. Cook, MC; Captain R. L. Wagner, MC; Lieut. Comdr. W. M. Morris, MC; Comdr. D. E. Lloyd, MC; Lieut. E. L. Auman, MC; Lieut. H. A. Shapiro, MC; Lieut. F. L. McGuire, MSC.



NURSES AND CORPSMEN



RECORD OFFICE — Left to right: R. G. Dinning, HM2; J. D. Rollins, HN; D. L. Kimbell, HN; Barbara A. Miller, HM3; R. G. Stern, HM3; A. R. Hosking, HM2.



RECORD OFFICE — Left to right: D. L. Kimbell, HN; J. D. Rollins, HN; Barbara A. Miller, HM3; R. C. Stern, HM3; R. G. Dinning, HM2; A. R. Hosking, HM2.



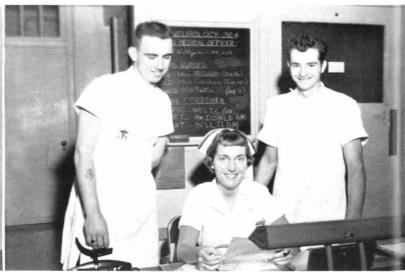
STAFF PERSONNEL: Captain L. Wagner, MC; Lieut. Violet M. MacKenzie, NC; T. H. Morrison, HM3; W. E. Lollis, HN; F. R. Evans, HN; L. Boehle, HN; (viewing patients' art display).



DOCTORS' CONFERENCE: Lieut. Chiek Cheng, MC (Chinese Navy); Lieut. M. L. Brandon, MC; Lieut. H. A. Shapiro, MC; Lieut. D. R. Downs, MC; R. W. Barris, MD (civilian consultant).



MASTER AT ARMS DAY CREW: J. D. Rollins, HN; B. L. Crone, HM3; A. R. Hosking, HM2; R. G. Dinning, HM2.



NEUROLOGY WARD 36-4 NURSES STATION — Left to right: J. E. Wilson, HM3; Ensign Joyce Kearns, NC; G. W. West, HN.



Lieut. Comdr. W. M. Morris, MC; A. R. Hammick, HN.



WARD 36-3 NIGHT CREW — Left to right: G. R. Wilson, HN; G. J. Gallant, HN; R. W. Huggins, HN; D. Ray, HN; S. Wotkyns, HN; V. R. Smith, HN; Lieut. (j.g.) Ruth S. Martin, NC.



NEUROLOGICAL EXAMINATION: Ensign Joyce C. Kearns, NC; Lieut. V. V. MacKenzie, NC; Lieut. H. A. Shapiro, MC; Lieut. C. C. Cheng, MC (Chinese Navy).



WARD 36-3: Forest R. Evans, HN; Bill Lollis, HN; patient barber cutting shipmate's hair.



WARD 36-3 — Left to right: E. E. Murphy, HN; M. C. Sagar, HN, and patients singing with Ruth Mounts (Red Cross Worker).



RECREATION THERAPY: B. L. Crone, HM3; B. E. Lollis, HN; C. R. Baker, HN.



ELECTROENCEPHALOGRAPH LAB: Jean M. Banks, HMC (in charge), discussing anatomy of the brain with Robert M. Armstrong, HM3.



J. E. KELTY, HN, running an EEG Tracing.



CLINICAL PSYCHOLOGIST: Lieut, F. L. McGuire, MSC, assisting P. L. Baumert, HN (Psychology Technician), in tabulating Recent Research Data.

CLINICAL PSYCHOLOGIST: Lieut. McGuire, MSC, administering the Rorschach Test.

## OPHTHALMOLOGY SERVICE

The Ophthalmology Service has one branch, Optometry. The objectives of this service are to provide the finest eye care possible to military personnel and their dependents, and to provide specialty training and residency leading to certification by the American Board of Ophthalmology.

Specialized functions of this service include major and minor ophthalmic surgery, refractions, orthoptics, prosthetic ocular appliances, contact lenses, muscle balance testing, visual fields, and the treatment of all ocular diseases.

During the past calendar year over 24,000 patients were examined and treated, approximately 800 minor and major surgical procedures were performed and approximately 8,000 refractions were done. About 40 per cent of these statistics represent dependents. The finest and most modern ophthalmic instruments and equipment are available.

A formal and systematized course of instruction consisting of didactic and clinical teaching is in effect. The program is approved for three year residency leading to certification by the American Board of Ophthalmology.



CAPTAIN RUDOLPH P. NADBATH, MC, USN Chief, Ophthalmology Service



SICK-CALL WARD 2-2: Lieut. Comdr. Frank Preston, MC; Lieut. F. A. Casey, NC; R. T. Trammell, HN; Lieut. Dan Bitner, MC; R. L. Robertson, HN; Lieut. Comdr. Kun Pok Yi (Korean Navy); Capt. Nadhath



CHECKING BACTERIAL CULTURE: James Baumgarten, HN; Everett Clark, HM3; Lieut. Ralph Hadlund, MC; Lieut. (j.g.). Marguerite Halstead; Mike Pearson, HN.



Irene Shinn, Secretary.



CASE DISCUSSION: Lieut. Comdr. Frank Preston, Captain Rudolph Nadbath.



Captain Nadbath discussing a patient's diagnosis with surgical nurse, Edna Fientuch, NC.



OPHTHALMOLOGY SERVICE PERSONNEL — Top row, left to right: Lieut. Comdr. Frank Preston, MC; Lieut. James Russell, MC; Captain Rudolph P. Nadbath, MC; Captain Sherman M. Peabody, MC; Lieut. George R. Courtney, MSC; Lieut. (j.g.) Fred C. Parker, MSC; Lieut. Francis E. McGruire, MSC; Lieut. Comdr. Kun Pok Yi, MC (Korean Navy); Lieut. Dan G. Bitner, MC. Middle row: Russell T. Trammell, HN; David A. Green, HN; Lieut. Edna W. Feintuch, NC; Ensign Alice K. Freas, NC; James Baumgarten, HN; Ronald E. Wyborny, HN; Everett E. Clark, HM3, Front row: Larry J. Helgeson, HN; Robert L. Robertson, HN; H. P. Cole, HA; H. Couch, HM1; M. H. Dykes, HM1; D. K. Dunn, HN; G. H. Schroeder, HM3.



OPHTHALMOLOGY DOCTORS, NURSES, CORPSMEN — Top row, left to right: Lieut. Comdr. Frank Preston, MC; Lieut. James Russell, MC; Ensign Alice K. Freas, NC; Lieut. Edna W. Feintuch, NC; Captain Rudolph P. Nadbath, MC; Captain Sherman M. Peabody, MC; Lieut. Comdr. Kun Pok Yi, MC (Korean Navy); Lieut. Dan G. Bitner, MC. Bottom row: H. P. Cole, HA; Robert L. Robertson, HN; Russell T. Trammell, HN; Larry J. Helgeson, HN; James Baumgarten, HN; David A. Greene, HN; Everett E. Clark, HM3; Ronald E. Wyborny, HN.



OPHTHALMOLOGY NURSES, CORPSMEN — Top row, left to right: Russell T. Trammell, HN; Larry J. Helgeson, HN; Ensign Alice K. Rreas, NC; Lieut. Edna W. Feintuch, NC; James Baumgarten, HN; David A. Greene, HN. Bottom row: Robert L. Robertson, HN; H. P. Cole, HA; Ronald E. Wyborny, HN; Edward E. Clark, HM3.



OPHTHALOMOLOGY DOCTORS' CONFERENCE: Norman Brooks, MD (County Hospital); Lieut. James Russell, MC; John Bloomenthal, MD (Civilian Consultant); Lieut. Dan G. Bitner, MC; Captain Rudolph P. Nadbath, MC; Lieut. Ralph L. Hadlund, MC; Lieut. Comdr. Kun Pok Yi, MC (Rokn); Captain Sherman M. Peabody, MC.



PERIPHERAL FIELD EXAMINATION — Left to right: Captain Rudolph P. Nadbath, MC; Ronald E. Wyborny, HN; James Baumgarten, HN; Lieut. Ralph L. Hadlund, MC; Lieut. Comdr. Frank R. Preston, MC; Larry J. Helgeson, HN; Lieut. Comdr. Kun Pok Yi, MC.



REMOVAL OF ORBITAL LIPOMA — Left to right: Larry J. Helgeson, HN; Lieut. Ralph L. Hadlund, MC; Lieut. James S. Russell, MC; Lieut. Comdr. Kun Pok Yi, MC (Rokn); Lieut Velia C. Covolo, NC; Ronald Wyborny, HN.



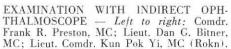
MINOR SURGERY — Left to right: Lieut. Comdr. Preston, MC; Lieut. Russell, MC; Lieut. Comdr. Kun Pok Yi, MC (ROKN); M. W. Pearson, HN; J. L. Baumgarten, HN.



AQUEOUS HUMOR: L. J. Helgeson, HN; Lieut. Bitner, MC; Lieut. Feintuch, NC.



PHOTOGRAPH WITH THE RETINAL CAMERA — Left to right: Lieut. James S. Russell, MC; James Baumgarten, HN; Ronald E. Wyborny, HN; David A. Greene, HN.







A LESSON IN REFRACTION — Left to right: Lieut. Jim Russell, MC; R. E. Wyborny, HN; L. J. Helgeson, HN; Lieut. Hadlund, MC; Lieut. Comdr. Preston, MC; M. W. Pearson, HN; Lieut. Comdr. Kun Pok Yi, MC (ROKN).



SLIT LAMP STUDY — Left to right: Lieut. Russell, MC; Lieut. V. Covolo, NC; Lieut. Comdr. Kum Pok Yi, MC (ROKN); Ronald E. Wyborny, HN; Captain Nadbath, MC; Michael W. Pearson, HN; Lieut. Hadlund, MC (examining).



TONOMETER TEST FOR GLAUCOMA
— Left to right: Mike Pearson, HN; Lieut.
Hadlund, MC; James Baumgarten, HN;
Ron Wyborny, HN.



MEASURING MUSCLE — Left to right: Lieut. Preston, MC; Mike Pearson, HN; Lieut. Hadlund, MC; Larry Helgeson, HN; Lieut. Comdr. Kum Pok Yi, MC (ROKN); Captain Nadbath,



RETINOSCOPY — Left to right: Lieut. Comdr. Preston, MC; Jim Dowling, AN.



DR. BITNER — "victim of his own devices": L. J. Helgeson, HN; Lieut. Bitner, MC; Lieut. Feintuch, NC; Captain Nadbath, MC.



PRE-OPERATING SCRUB: Captain Peabody, MC; Lieut. Russell, MC.



SURGERY — eye preparation: Lieut. Feintuch, NC; Everett Clark, HM3.



PREPARING FOR SURGERY: Lieut. M. Gaines, NC; Everett Clark, HM3; Lieut. Feintuch, NC; David Greene, HN.



THE BIG MOMENT: Lieut. Gaines, NC; Captain Peabody, MC; Lieut. Feintuch, NC; Lieut. Russell, MC; David Greene,



GETTING IN THE SWING OF SURGERY: Lieut. Feintuch, NC; Captain Peabody, MC; Lieut. Russell, MC; Lieut. Gaines, NC.

#### **OPTOMETRY**



OPTOMETRY PERSONNEL — Standing, left to right: M. H. Dykes, HM1; Lieut. G. R. Courtney, MSC; Lieut. F. E. McGuire, MSC; Lieut. (j.g.) F. C. Parker, MSC. Kneeling, left to right: D. K. Dunn, HN; G. H. Schroeder, HM3; H. Couch, HM1.



INSTRUCTIONS ON INSERTION OF CORNEAL CONTACT LENS — Left to right: Lieut. McGuire, MSC; G. H. Schroeder, HM3.



SPECTACLE DISPENSING — Standing: Lieut. (j.g.) Parker, MSC; B. G. Bryant, HN; G. H. Schroeder, HM3. Seated: G. Garrison, HM2.



RECEPTION DESK — Left to right: G. H. Schroeder, HM3; D. K. Dunn, HN; B. G. Bryant, HN.



KERATOMETER—MEASURING COR-NEAL CURVES: Lieut. Courtney, MSC; Lieut. (j.g.) Parker, MSC.



FUSION EVALUATION — Left to right: B. G. Bryant, HN; G. H. Schroeder, HM3; D. K. Dunn, HN; Lieut. Parker, MSC.



OPEN WIDE — Left to right: F. L. Hill, HM1; Lieut. McGuire, MSC; G. H. Schroeder, HM3; B. G. Bryant, HN; D. K. Dunn, HN.



EDGE-GRINDING OF SPECTACLE LENSES — Left to right: P. O. James, HN; F. L. Hill, HM1; B. C. Cannon, HM1; M. H. Dykes, HM1.

## OTORHINOLARYNGOLOGY SERVICE

The Department of Otolaryngology at this hospital conducts a large outpatient clinic (14,000 visits annually) maintains a 50-bed ward for enlisted active duty and retired inpatients, has available beds for officer personnel (in S.O.Q.) and for dependent patient personnel (women's ward and Pediatric ward). It occupies a modern, well-equipped, three operating room surgical suite including a complete endoscopic set-up for bronchoesophagology and operating microscope for otologic surgery.

Provision is made for the specialized care of diseases, disorders and injuries of the ear, nose, and throat, with surgery being performed as indicated. Diagnostic and therapeutic endoscopic procedures such as larynogoscopy, bronchoscopy, and esophagoscopy are conducted as requested. In addition to routine surgery such as tonsillectomy, adenoidectomy, spetectomy, sinustotomy, and mastoidectomy such procedures as rhinoplasty, otoplasty, stapes mobilization, fenestration, thyrotomy, tracheotomy, laryngectomy, and radical sinus surgery are performed.

At this time the personnel includes the chief of the department (American Board of Otolaryngology diplomate and ACS member), one resident at third year level, one at second year level and one at first year level. At frequent but irregular intervals an intern is assigned to the department for one month upon his selecting otolaryngology as an elective. General practice residents occasionally are with the service for a three month period.

In the outpatient clinic 60 per cent of the visits are made by dependent personnel, 9 per cent by retired personnel and veteran administration beneficiaries and 31 per cent by active duty personnel of the armed forces. Audiometric evaluations of hearing loss as part of physical examinations and otolgic diagnosis average 360 monthly.

For the calendar year 1957 a total of 2,069 major operations and 1,644 minor operations were performed.

Residency training in Otolarynology at this hospital is set up to meet the requirements of the council on medical education and hospitals, the American College of Surgeons, and



CAPTAIN LeROY E. WIBLE, MC, USN Chief, Otorhinolaryngology Service

the American Board of Otolaryngology.

The residency embraces three years of progressive training in the specialty and is preceded by one year of rotating internship. The residents are offered a board training which includes some experience in closely related fields of surgery. Adequate clinical and operative experience is provided. Essential equipment for diagnosis and treatment is available. The clinical material is abundant and adequate to provide training in the various divisions of the specialty including broncho-esophagology, allergy, anesthesiology and maxillofacial surgery. The training includes a systemic course of instruction with demonstrations on clinical and technical subjects pertinent to various phases of otolaryngology.

Surgical technique is taught to the extent that residents will be able to undertake operative work on their own responsibility in their second and third year. Training is available in the applied anatomy of the ear, nose, throat, neck and chest.

Frequent departmental conferences including a detailed discussion of difficult cases are held. Clinical pathology conferences are attended by the residents bi-monthly. The residents study and discuss with the pathologist tissues removed at operation and autopsy material from patients on the service.

The designated Chief of Service is responsible for the quality of all work done in the department and his assignment is not rotated or honorary. He is available full time.

The hospital provides an adequate number and variety of surgical patients. Program is so organized that the residents will hold positions of increasing responsibility for the care and management of patients when they receive sufficient operative experience to acquire skill and judgment.



OTORHINOLARYNGOLOGY SERVICE: General view of facilities.



 ${\tt SURGERY-Left\ to\ right:}$  Lieut. Charles Emerick, MC; Captain Wible, MC; J. M. Evans, HM3.



TONSILLECTOMY: J. Evans, HM3; I. V. Biddle, HN; Lieut. Comdr. Helen Schlesinger, NC.



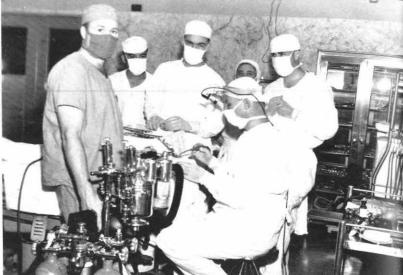
NOSE SURGERY: Comdr. Kenneth J. Kelley, MC.



NOSE SURGERY: Lieut. James C. King, MC.

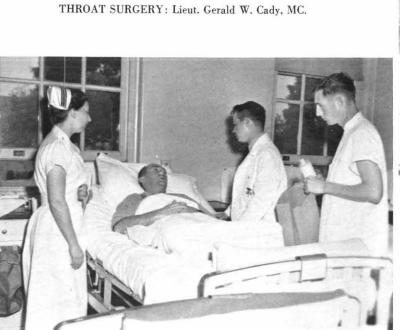


OTHRHINOLARYNOGOLOGY; "SAY AH": Lieut. Comdr. Helen Schlesinger, NC; T. Magness, BM3 (patient).



TONSILLECTOMY-ADENOIDECTOMY: Lieut. Walter C. Emery, MC; H. B. Alexander, HM2; Lieut. Comdr. Helen Schlesinger, NC; J. M. Evans, HM2; Comdr. K. J. Kelley, MC.





OTORHINOLARYNGOLOGY WARD: Lieut. (j.g.) Ethel Creswick, NC; Lieut. James C. King, MC; F. Anglin, HA.



AUTOCLAVE: B. P. Segaya, HM3.

#### DENTAL SERVICE

The Dental Service is an integral component of the hospital command. It is headed by the Chief of the Dental Service who is a board-certified oral surgeon with teaching experience. The officer-staff comprises an allowance of eight dental officers, all of whom are experienced, regular Navy, career dentists.

The enlisted-staff includes a chief petty officer and a crew of fifteen trained dental technicians. Four members of this crew are qualified as dental prosthetic technicians, and they are the skilled laboratory technicians who fabricate varied types of dental appliances.

All phases of dentistry excepting orthodontia ("straightening of teeth") are practiced in the Dental Service. Teeth are filled when required with precious metals, semi-precious metals, or plastic materials as best indicated to meet the individual need. Hopelessly degenerated teeth are removed under local or general anesthesia. Missing teeth are replaced by bridgework, partial dentures or full dentures.

All dental technicians receive particular instruction in providing oral prophylaxis ("cleaning teeth"). This service is given by the dental technician under the supervision of the doctor. In addition to assisting the doctor during dental operation, dental technicians take X-ray exposures and process the films for the doctor's examination.

One of the busy branches of the Dental Service in a large hospital, like this, is oral surgery. This department provides for the extraction of teeth and for the surgical care of varied diseases of the mouth. Also, a large number of fractured jaw-bones are treated here over a year's time. It is not unusual to see from 20 to 25 fractured jaw cases in the dental ward at all times. Specialists with particular training in oral surgery are assigned to this department.

The major objective of dentistry is to salvage teeth. Sometimes this is done by simply filling a tooth after all of the decay has been thoroughly removed. But at other times, when dental decay is markedly advanced, it may be necessary to devitalize the tooth ("remove the nerve") in order to save the tooth before filling it. Salvaging such "dead teeth" for



CAPTAIN THEODORE A. LESNEY, DC, USN Chief, Dental Service

many years of normal usage is a specialty of dentistry known as Endodontics.

Since some teeth are lost from diseases involving the gum tissues, rather than from decay, specialized care is required in efforts at saving such teeth. This specialty within dentistry is called Periodontia, and the periodontist treats "pyorrhea" and such other dental diseases as cause teeth to become loose. Hackneyed expressions like "the teeth are OK but the gums have gotta go," are not wholly without truth. Oftentimes, the periodontist does find it necessary to remove chronically diseased gum tissue in order to prevent the loss of bone that holds the teeth firmly in place.

Most human beings lose some or many of their teeth throughout a lifetime. If only a few teeth are lost, it may be possible to span such a space with a dental "bridge." Dental bridgework is time consuming and it is an exact technical science.

If several, but not all, teeth are lost, it may be possible to replace the missing teeth with partial dentures. Such appliances are remarkably comfortable and are retained in position through clasps that engage some of the remaining sound and functional teeth.

Of course, when all of the teeth have been lost, the patient

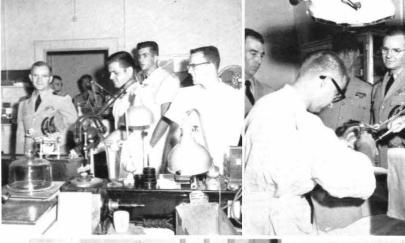
requires full dentures. Modern techniques in this field permit the fabrication of natural-looking dentures with a great degree of masticating efficiency. Sometimes, one of the tront false teeth in an artificial denture is intentionally stained, or a gold filling may be placed in it, so as to resemble one of the patient's natural teeth, and thereby retain the "natural" appearance of the artificial denture. The prosthodontist and his team of dental prosthetic technicians are specialists in the art of replacing missing teeth.

Many new and specialized techniques in modern dentistry have dictated the need for post graduate study, further training and experience—so that today the "all around dentist" is becoming as rare as is the "all around surgeon." Dentistry has been required to provide specialists such as oral surgeons, prosthodontists, endodontists, periodontists, and orthodontists—to treat particular dental problems that frequently require more than the usual knowledge of dentistry. All such specialists (except orthodontists) are available within the Naval Service—and more specifically, within this hospital.

Every year, two dental interns and one oral surgery resident receive training within the Dental Service of this command. The interns are recent graduates of dental schools and have been licensed to practice dentistry in one or more of the States of this country. They receive this intern training so as to better prepare themselves to provide the best possible dental services for members of the Armed Forces. The oral surgery resident is an experienced dentist undergoing extensive training for ultimate specialization and certification by the American Board of Oral Surgery.

It is generally agreed that the best dentistry in the world is practiced in the United States, and the U. S. Naval Dental Service is highly respected by civilian, component societies of the American Dental Association. Every effort is exerted toward providing the best possible dental care for members of the Armed Forces—and the soldier, sailor, marine and airman can get this service from the combined efforts of dental officers and their dental technicians stationed with our troops throughout the world.

CAPTAIN ALLAN S. CHRISMAN, MC, USN, inspects Dental Service facilities.





DENTAL SERVICE ADMINISTRATION SECTION: E. C. Nicholson, DT; K. E. Rupp, DTC.



SICK CALL—DENTAL SURGERY: Lieut. Mary P. Molloy, NC; I. S. Quintalig, DT2; Captain Theodore A. Lesney, DC.



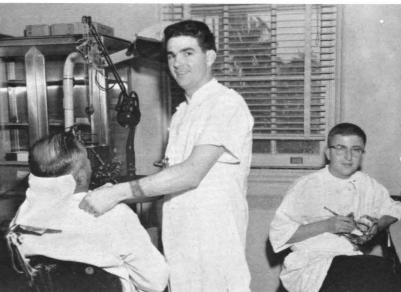
PROSTHETIC LABORATORY: R. C. Fisher, DN; Captain John W. Miller, DC.



ORAL SURGERY SERVICE: S. J. Neighbors, DN; B. Staley, DT2; Captain Harold W. Feder, DC.



DENTAL OFFICE FOR TREATMENT OF PATIENTS FROM CHEST SERVICE: Comdr. E. Schnoebelen, DC; E. D. Bagley, DN; R. E. Gillette, AT1 (patient).



PROSTHETIC UNIT: R. C. Fisher, DN; Lieut. Marvin Molacek, DC.



OPERATIVE SECTION: F. A. Kroll, DN; Lieut, Kenton T. Bradley, DC.



BRIDGEWORK AND CROWNS: E. O. Spurlin, DT3; Lieut. Robert E. Shirley, DC.



Patient having impacted "wisdom tooth" extracted.



CAST GOLD PARTIAL FRAME IN PROCESS: J. H. McCann, DN.

DENTAL X-RAY: A. R. Hughes, DT2; L. D. Shivers, SA (patient).



DENTAL WARD: D. R. Higerd, DN; R. S. Woolf, DN; Lieut. Mary Molloy, NC; Captain Harold Feder, DC.



DENTAL RECREATION ROOM: H. D. Corbin, MMCL; C. D. Saterfiel, AN; F. C. Morehead, Pvt.; W. G. Cell, Pvt.; W. A. Churchill, AN.

### ORTHOPEDIC SERVICE

The Orthopedic Service cares for patients with injuries, diseases, degenerative processes and neoplasms affecting the motor skeletal system. This comprises bones, joints, muscles and their component parts such as tendons and tendon sheaths; joint capsules, ligaments, cartilages and synovial linings.

Congenital and developmental anomalies of the component parts are of frequent occurrence. Abnormalities of gait, posture and appearance provoke frequent consultation. Surgery, splinting, bracing, protective or corrective casting, special shoeing as well as provision of artificial limbs are modalities of orthopedic treatment.

The department is subdivided into male, female and pediatric services. These in turn are subdivided into officer, enlisted, service women and dependent women.



CAPTAIN DESALES DU VIGNEAUD, MC, USN Chief, Orthopedic Service Head, Physical Medicine and Rehabilitation

Inpatient care is also provided at this activity for Veterans' Beneficiaries and "on the job" injuries to civilian employees.

A tremendous work load is contributed by the high percentage of retired service personnel and their families in this area. Medicare does not cover the retired personnel.

This is the Navy's biggest hospital and the patient load is reflected in the Orthopedic Department. An average daily census of inpatients is in excess of 225. A minimum of 700 outpatients are seen each month.



ELIZABETH KINNICH, Secretary to Chief, Orthopedic Service



R. L. Walker, HN; Lieut. A. S. Leonard, MC; assisting Captain Herbert A. Markowitz, MC; applying double hip spica to James Bannister (patient).



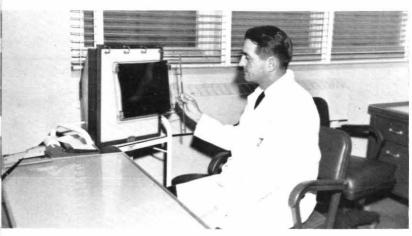
APPLYING DOUBLE HIP SPICA: R. L. Walker, HN; Captain Markowitz; D. C. Barber, HM3; Lieut. R. C. Trump, MC; James Bannister (patient).



APPLYING DOUBLE HIP SPICA: Captain Markowitz, MC; Lieut. Trump, MC; D. C. Barber, HM3.



APPLYING DOUBLE HIP SPICA: Captain Markowitz, MC.



X-RAY STUDY: John W. Howard, Comdr., MC.



 $AIRMAN\ Pursley\ gets$  orthopedic attention; J. R. Earnest, HN, and Walker, HN.



TRACTION CRADLE: Comdr Howard; Ethel J. Creswich, Lieut. 84 (j.g.) NC, attend R. H. Schroeder, BM3.



ADJUSTMENTS: N. H. Jensen, HN; Lieut. (j.g.) Ethel Hillin, Patient Schroeder.



NURSES STATION: Catherine Reuland, Lieut. Comdr., NC; Jane Foschia, Lieut. (j.g.) NC; Donna Jean Adams, Ensign, NC.



MINISTERING: Norman Jensen, HN, Lieut. (j.g.) NC Ethel Hillin



TRACTION: C. C. Ogden, HN; Mary Sanchez, Ensign, NC; Patient G. P. Taylor, MA2.



CHOW DOWN: E. R. McCann, HN, Patient F. J. Kasimatis, EN3.



TWO OF A KIND: D. L. Pierce, Pvt., USMC; M. C. White, AN.



WARD WORK: Ethel Hillin, Lieut. (j.g.) NC; Jack Saglio, Lieut., MC; Henry Mitchell and Earl McCann, HN's.

## PHYSICAL THERAPY



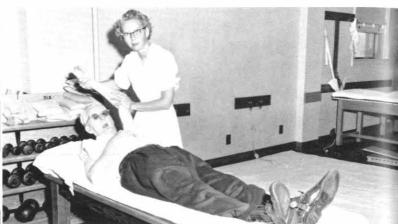
IN MUSCLE:



HUBBARD TANK: Comdr. Edna Townsend, MSC; Dorothy Nichols (civilian).



CLASSROOM: Comdr. Edna Townsend, MSC.





HUBBARD TANK: A. Ekstrom, HM3; A. B. Steele, HM3; D. Sander, HM2; Comdr. Edna Townsend.



HUBBARD TANK: Comdr. Edna Townsand.



ELECTRICAL STIMULATION FOR BELL'S PALSY: R. Aguirre, SR (patient); P. A. Cozine, HM3.



WHIRLPOOL BATH: J. R. Wooton, FA (patient).



ULTRA-SOUND MACHINE: Lieut. Comdr. Mary C. Grosz, MSC.



TILT TABLE: J. F. Pilling, HM3; W. E. Anderson, HM3; Kathryn E. Abrams (civilian physical therapist)



ACTIVE DeLORME EXERCISE STRENGTHENS KNEE MUSCLES: D. F. Sander, HM2; A. A. Ekstrom, HM3; L. R. Daniell, Pvt (USMC).



REHABILITATION: Lieut. Comdr. Mary C. Grosz.



A. A. Ekstrom, HM3; Active exercise on ankle machine to strengthen weak ankle muscles.



REHABILITATION: W. E. Anderson, HM3; Lieut. Comdr. Georgia McKearly, MSC.



ELECTRICAL STIMULATION FOR NERVE INJURY: A. S. Thomas, HM3; A. L. Fisher, HN; Lieut. Comdr. Jean Steffan, MSC; G. B. Detweiler, HN.



INTERMITTENT CERVICAL TRACTION: J. F. Pilling, HM3.

# OCCUPATIONAL THERAPY



K. K. Zane, HM3; Lieut. Comdr. Lydia Kieler, MSC; R. L. Nesman, HM1.



L. D. Thomas, HN; Lieut. Comdr. Lydia F. Kieler, MSC; H. J. Greenwood, HM3; E. J. Crummey, HN.



T. C. Lewis, SN; Lieut. (j.g.) Shirley D. Fish, MSC (in charge); J. D. Kay, PFC, USMC.



G. J. Sullivan, YNC; Lieut. (j.g.) Shirley Fish, MSC.



V. R. Broussard, Cpl., USMC; R. H. Hatfield, SR; R. L. Cordon, TA.



L. H. Smith, Col. (USA) (retired).



N. L. Lehr, Pvt., USMC; L. I. Frianeza, TA; F. V. Carabeo, TA.



CAPTAIN JOHN W. KOETT, MC, USN Chief, Radiology Service

#### RADIOLOGY SERVICE

Radiology Service is divided into three basic functional components: Diagnostic, Therapeutic and Training Sections.

The Diagnostic section provides all types of X-ray examinations. When a ward medical officer refers a patient to the department for examination, many persons may not realize it, but the X-ray technician who takes the films is following a procedure prescribed by the radiologist—a medical officer with post graduate radiological training. The radiologist's interpretation of these X-ray films (often supplemented by his personal and fluoroscopic examination) is an important part of the information required by the referring medical officer for diagnosis.

Some specialized functions of the diagnostic section are examinations of the spinal cord for tumors, herniated discs and other abnormalities. Here, a spinal tap is made and the withdrawn fluid is replaced by a dye. This dye casts a shadow on the X-ray films and fluoroscopic screen, thereby helping the radiologist and neurosurgeon to locate the abnormal site. The procedure is commonly known as a "myelogram."

Another specialized examination is an "angiocardiographic study." This is a study of the different chambers of the heart. It differs from the "myelogram" in that the dye is injected into a vein, whence it promptly flows into the heart. At this precise moment rapid X-ray films of the heart are made, outlining the individual chambers. In this connection, of special interest is a Swedish-make X-ray machine capable of taking views in two planes on a continuous roll of film, not too dissimilar in principal to the rapid exposure method found in ordinary movie cameras. The roll of developed film obtained from this device provides valuable information to the cardiologist, surgeon and radiologist in arriving at a more accurate diagnosis, particularly in suspected congenital heart lesions.

The Therapeutic section is responsible for treatment of all patients presenting abnormal pathological states, from benign to malignant conditions. "Cobalt bomb," radium, X-ray and radioactive isotope therapies are available in the department for daily use.

Of interest is the training section. The department is approved for a full 3 years' residency training for medical officers in radiology as approved by the American Board of Radiology. The Department also maintains a training school for enlisted personnel, approved by the Bureau of Medicine and Surgery. Upon satisfactory completion of a one-year training period, the student receives an official XRT rating.

Though the radiologist and X-ray technician may frequently figure in our lives, many of us remain unfamiliar with their medical specialty.

#### COBALT TELECURIETHERAPY UNIT



Martin A. Teasley, HM2; William Skipwith, Jr., HM1; Lieut. (j.g.) Yong Kya Choe, MC (ROKN).



Francis J. A. Mullett, HM2; Comdr. F. W. George, MC.



William Skipworth, Jr., HM1; Comdr. F. W. George, MC.

#### COBALT TELECURIETHERAPY UNIT



Comdr. F. W. George, MC; Lieut. T. P. Moore, MC; William Skipwith, Jr., HM1.



MAIN X-RAY: M. C. Smith, HMC; William M. Strunk, Comdr., MC.



THREESOME: Gladys Vouaux; Nancy Murphy; Van Failing, in charge.



X-RAY FILES: Helen S. Williams, in charge.



"DEEP BREATH": K. O. Holt, patient; M. D. Teasley, HM2.



WAITING: Patients await call to have "pictures taken."



RADIOLOGY STUDENTS: Instructors are F. R. Ruml, HMC; F. X. Abell, F. D. Merret, J. E. Daniels, HM1's.



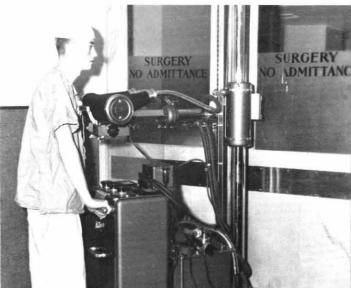
IN POSITION: Patient F. G. Merlenbach, Cpl., USMC; M. A. Teasley, HM2.



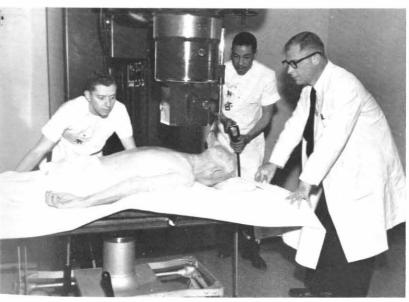
FILM PROCESSING MACHINE: Alvin Gerber, HM1; R. I. Puls, HM3.



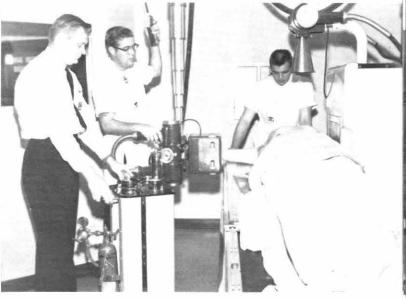
PORTABLE X-RAY: Roger Necas, HN; X-rays Charles Pope, Sgt. Major, USMC, as Ethel Carleton, Lieut (j.g.), and Dick Pohto, HN, assist.



EMERGENCY: J. F. Southerland, HM3, with portable machine used on Wards in emergency surgery.



EXPERTS IN ACTION: F. J. A. Mullett, HM2; W. Skipwith, HM1, and Jerome A. Golden, Lieut., MC, X-ray patient J. A. Pierce, Lieut. Comdr. (Ret.)



ANGIO-CARDIOGRAPHY demonstrated by F. R. Ruml, HMC; C. E. Hoyt, HM2; R. C. Necas, HM3.



COMDR. ALBERTA BURK, NC, USN Chief, Nursing Service

#### NURSING SERVICE

The Nursing Service makes an important contribution in the care of the patients.

Nursing itself is multivalued. It deals with healing, prevention and rehabilitation for patients and families, yet it is seldom a solitary performance.

The total plan for Nursing Service to the patients entails not only cooperation among the nursing personnel, but with every phase of hospital service and allied workers, as well as community agencies. By working with all services, direct nursing care is performed with the patient and indirect nursing care is performed away from the patient but in his behalf—totaling comprehensive nursing care.

Nursing is recognized in large dimensions, being one of the largest services in any hospital. In administration it involves a variety of personnel including nonprofessional personnel needing the direction that will ultimately be carried on to the patient. Many factors and many changes call for continuous analysis and evaluation of Nursing Services in order to formulate and recommend policies and procedures for the improvement of patient care.

In and for specific working situations Nursing Service provides personnel, professional and nonprofessional, with programs of preparation. Scheduled orientations, on-the-job training, continued education and management development contribute to the educational needs of a wide variety of personnel. The immediate consumers of the programs reap many benefits, but the ultimate beneficiaries are the patients who are served with increased confidence and performance.

Nursing Service is not only performance in skills and technics. Nursing is care of people, understanding of people, in an operation which involves comfort, safety, therapeutic effectiveness, economy of materials, organization and adaptivity of planning.

Just as the Nursing Service is concerned with actual patient care, it is concerned with the problems encountered. All nursing activities, administration, supervision, ward management and education benefit by the studies and programs in research which Nursing Service carries out to formulate the basis for the best in patient care.

Analysis of Nursing Service leads one to believe that this is not just one service but an interwoven complexity of services. Yet each part has a tie. And Nursing Service through its functions serves, "That the Nursing Needs of People May Be Met."



Lieut. Comdr. Hazel Clark, NC; Edith Ellis (secretary); Comdr. Ruth M. Cohen, NC (Assistant Chief Nurse); Comdr. Alberta Burk.



Lieut. Comdr. Hazel Clark; Comdr. Ruth Cohen; Edith Ellis.



EDUCATION: R. H. Irwin, HN; Lieut. Audrey Elmore, NC; Lieut. Patricia H. McIntyre, NC.



EDUCATION: Lieut. Patricia H. McIntyre.





INDOCTRINATION FOR NEW CORPSMEN FROM HOSPITAL CORPS SCHOOL: Lieut. Comdr. Audrey Elmore.



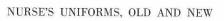
INDOCTRINATION: Lieut. Comdr. Audrey Elmore.



EDUCATION: Ensign Louise Hammond, NC; Ensign Barbara J. Fox, NC; Ensign Carol J. LaPoint, NC; Ensign Kathleen Stelzer, NC; Ensign Barbara Anne Matt, NC; Lieut. (j.g.) Therese M. Banach, NC; Lieut. Comdr. Audrey Elmore (instructor).



HOSPITAL CORPS ASSIGNMENT CENTER: Lieut. Comdr. Lois E. Brown, NC; R. A. S. Finch, HM3.







CAPTAIN JOHN S. SHAVER, MC Chief, Pathology Service

#### PATHOLOGY SERVICE

The Pathology Service provides clinical and anatomical pathologic determinations on inpatients of this hospital and the smaller activities within the Eleventh Naval District which do not have laboratory facilities available; it serves as a Histopathologic Center for the Armed Services Facilities in the Sixth Army Area and Fourth Air Force south of the 36th parallel; it maintains and operates a Blood Bank; it maintains the hospital morgue, and it maintains records and preserves anatomical specimens for use by surgical residents.

The Pathology Service conducts conferences and training programs in residency type training in clinical pathology and pathological anatomy; operates a school for clinical laboratory and blood bank technic; reviews and demonstrates histopathology tissue slides with hospital staff medical officers; holds clinical pathological conferences for hospital staff and medical officers; holds tissue slide demonstrations and conferences for the various residency specialities by civilian consultants in pathology and the pathology staff medical officers.

The Laboratory Service is divided into four subdivisions: anatomic pathology, clinical pathology, blood bank and training research.

The Anatomic Pathology Branch performs necropsies on all cases where permission is obtained, and prepares complete autopsy protocols, which includes a clinical summary, gross description, microscopic descriptions, and a final summary of the case; it performs histopathological examinations on all normal or abnormal tissues which are removed from patients during surgery, and prepares a complete written report giving both gross and microscopic findings and a diagnosis; it performs frozen section studies on submitted tissues for the purpose of rapid histologic diagnosis; it forwards completed pathological reports (gross and microscopic findings) to the medical officer or activity concerned; it provides pathologic material (wet tissues, slides, paraffin tissue blocks and written reports) of all autopsies and unusual problem cases to the Armed Forces Institute of Pathology, for the tumor registry, teaching purposes, consultation and review; and it inoculates Naval personnel (hospital staff) as required.

The Clinical Pathology Branch performs routine and special clinical laboratory tests on inpatients and outpatients of this activity and smaller Naval activities within the Eleventh Naval District which do not have laboratory facilities available. These tests include bacteriology, clinical chemistry (blood and urine) serology, hematology, parasitology, endocrine studies and exfoliative cytology for cancer detection. It forwards results of such examinations to activities or medical officers concerned.

The Blood Bank collects, processes and stores whole blood for transfusion purposes of patients in this hospital, the Coronado Annex, the Naval Hospital at Oceanside, and the USN Hospital in USS Haven at Long Beach, California. It also prepares typing sera for use by the Bank.

The Training and Research Branch provides training of Pathology Residents in Clinical Pathology and Pathologic Anatomy; training of Residents in Surgery; training of Residents in Gynecology and Obstetrical Pathology; training of interns in clinical and anatomical pathology; it operates a school in laboratory technic, each period of training for each class lasting 14 months and consisting of 2,172 hours of practical training and 228 hours of theoretical lectures; and it provides correlation and assistance with the research studies by medical officers of this activity which have been approved by the Bureau of Medicine and Surgery.

The Pathology Service staff medical officers include a Chief of Pathology Service, an Assistant Chief, five Residents in Pathology, plus three Medical Corps Officers.

There are also 26 enlisted laboratory technicians, three Civil Service technicians, and one enlisted mortician. There are 40 enlisted students assigned to the School of Laboratory Technic.

The general scope of the work in Pathologic Anatomy includes 500 yearly Necropsies, 10,000 yearly Surgical Specimens, and 11,500 yearly Exfoliative Cytologies.

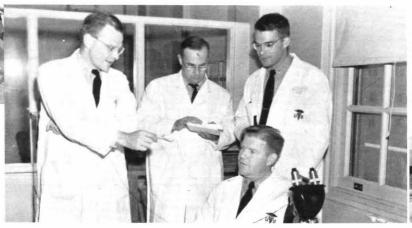
The Blood Bank has 11,400 yearly donors, and clinical pathology tests in all categories total 760,000 yearly.



CAPTAIN GEORGE E. MEADOR, MC Assistant Chief, Pathology Service



CAPTAIN HARLON W. HARRISON, MC Resident Pathologist



TALKING IT OVER: James E. Wilson, Jr., Lieut., MC; John B. Adamson, Captain, USAF; Peter D. Van Peenen, Lieut., MC; Charles R. Cotham, Lieut.



SECRETARIES: Mrs. Catherine N. Wolf, Mrs. Margret T. Enoch.



GROSSING TISSUES: Air Force's Captain Adamson.



GETTING CLOSE UP: L. E. McHenry, Lieut., MC.



RUNNING TEST: C. A. Brunner, HM3; J. A. Cain, HN.



SURGICAL SLIDE TESTS: Miss Maxine N. Reynolds, Civilian Technician.



CUTTING TISSUE: C. E. Huneycutt, HM3; A. L. Barnett, HM1.



CHEMISTRY DEPARTMENT: R. P. Poe, HMC; J. W. Owens, HMC; Paschal O. Grimaldi, Lieut. (j.g.), MSC.



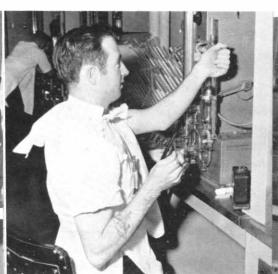
SPECIAL CHEMISTRY: D. L. Andrews, HM3; K. L. Darr, HM1; J. A. Lightfoot, HN.



SERUM TEST: W. E. Medick, HM3; M. B. Garcia, HM3; E. D. Sullivan, HM2.



CHECKING CONTENTS: J. G. Wells, HN; J. W. Hughes, HM3.



CO2 APPARATUS: HN Wells at work.



SPECIAL CHEMISTRY: H. L. Sullivan, HM2; Chief Poe, Lieut. (j.g.) Grimaldi.

COUNTING CELLS: F. Thompson, HM3; A. J. Benson, HN.



TB LAB: R. E. Gillette, HM2; T. A. Price, HM2; M. Orgill, HM2.



THE NEEDLE AGAIN: Patient S. J. Brill, Catherine A. Demmer, HM2.



CROSS MATCHES: J. W. Rampsch, HM1, E. R. Bright, HM2.



PRENATAL TYPINGS: Bright and Alice F. Gravelle, HM2.



MORGUE CREW: D. R. Maynor, HM1, D. R. Jones, HN.



 ${\tt BACTERIOLOGY:}$  P. Claypool, HM1; James F. Pribnow, Lieut., MSC; R. Robinson, HMC.



MEDIA ROOM: T. W. Stisher, HN; K. L. Scofield, HM2.



SEROLOGY: D. F. Coombs, HN; E. L. Conrad, HM3; D. H. Green, HM2.



BUSY TECHNICIANS: J. B. Massey, HM1; G. P. Mosseau, HM2; J. F. Flower, HM3.



PARASITOLOGY: W. H. Goff, HM1; K. R. Tucker, HM2.



HEMATOLOGY: H. P. Hill, HM2; J. D. Morris, HM3; J. L. Franklin, HM3; J. B. Elson, HN; F. J. Lacina, HN; D. W. Kirk, HM3; G. E. MacRill, HM2; Miss N. A. Anderson, Civilian Lab Technician.



BLOOD BANK, TYPING: Barbara Butterfield, Lieut. Comdr., MSC.



WALK-IN BLOOD BOX: Rosemary Davis, Lieut., NC.



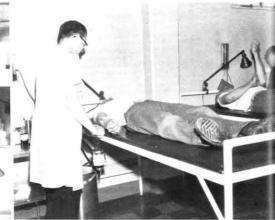
DONATING: L. D. Spencer, HM3; J. E. Copeland, Pvt., USMC.



BLOOD DONOR EXAMS: A. E. Mukomela, Lieut., MC.



GLASSWARE ROOM: R. K. Knutson, HM3; E. N. Murry, FN.



MARINES DONATE: G. F. Lubeski, HM3.



BLEEDING ROOM: R. L. Hanson, HM3; Lura J. Emery, Lieut., NC.



DONORS GET STEAK.



DONOR WAITING ROOM: Margaret R. Schroeder, Red Cross Nurses' Aid.

#### DEPENDENTS SERVICE

The Dependents Service at this hospital renders outpatient and inpatient service for eligible dependents of Armed Forces personnel, both active duty and retired. While the majority of patients are dependents of Navy and Marine Corps, a considerable number are dependents of other uniformed services. Most of the patients seen are from the San Diego area, although many are referred from other Armed Forces activities throughout Southern California, Arizona and Nevada.

Dependents Service cooperates with and is assisted by every service and division of the hospital. An average of 1,000 patients present themselves for treatment each day. The majority are seen in Buildings 22 and 38, in Pediatrics, Obstetrics, Gynecology, Surgery, Medicine, Orthopedics, Endocrine, General Clinic, Inoculation Clinic, and Screening and Emergency. Large numbers are referred to specialty clinics in other parts of the hospital, such as Eye, ENT, Dermatology, Chest Service, Proctology, Urology and Neurosurgery.

The Administrative Branch is headed by the Administrative Assistant to the Chief, Dependents Service. It provides an appointment system for dependent outpatient treatment in the various clinics of the hospital. It maintains all dependent outpatient records, transmits to and requests from other service activities, private hospitals and doctors, records of dependent patients. It handles medical insurance claims for dependent patients and departmental correspondence and compiles statistics for the service. It performs administrative procedures in regard to admission of dependent patients, averaging 700 per month. It maintains liaison with public health authorities, Red Cross and other county and federal agencies in matters pertaining to dependents. It assigns, supervises and maintains discipline of enlisted and civilian personnel throughout the Dependent Service.

The Administrative Branch, in short, performs all the administrative procedures that assist the flow of dependent patients through the inpatient and outpatient facilities.

The Administrative Assistant is aided by two HMC's, civilian clerical and stenographic personnel, and corpsmen.

The Emergency Clinic consists of 5 rooms, which include

1 surgical, 1 gynecological, 1 recovery room, and 2 medical rooms. It operates on a 24-hour basis for emergency care of dependents and averages between 5,000 and 6,000 patients a month.

A Screening Clinic is maintained during regular working hours for the purpose of expediting the flow of patients by referral to speciality clinics or to Emergency, and for treatment of minor complaints. This is staffed by one or two residents, detailed from other services, and a Navy nurse.

Two General Clinics were established for the treatment of non-emergent conditions not requiring speciality clinic treatment. Patients are seen by appointment by two staff medical officers, and the monthly average of visits is slightly over 1,000.

The Inoculation Clinic gives immunizations, routine, overseas and polio, as well as therapeutic inoculations. Immunizations in 1957 averaged 4,000 per month, and therapeutic inoculations, 600. This Clinic is staffed by a Navy nurse and a corpsman.

There are two Internal Medicine Clinics (5½ days a week), Surgery Clinic (5 days a week) and Orthopedic Clinic (2 afternoons a week), staffed by medical officers of the respective services and administratively controlled by Dependents Service.

X-ray and Laboratory facilities for dependents are located in the basement of Building 38. These are staffed by members of X-ray and Laboratory Service.



CAPTAIN ERNST R. MOELLER, MC, USN Chief, Dependent Service



CAPTAIN ERNST R. MOELLER, MC, USN Mayre Swickard, Secretary.



CAPTAIN ROBERT F. SCHUGMANN, MC, USN Assistant Chief, Dependents Service



ADMINISTRATIVE SECTION: Angeline Bradley (secretary); Robert Klein, HMC; Cecil Bolton, HMC; William Donnelly, CWO (Administrative Officer).



ADMINISTRATIVE SECTION: Cecil Bolton, HMC; Donnelly, CWO; Klein, HMC; Angeline Bradley.



RECORD SECTION: H. C. Mell, HN; D. W. Payton, HN; C. F. Richie, HN.



RECORDS OFFICE: P. Gomez, HM3; H. E. Doering, HM2; P. L. Nye, HM1; W. G. Keenan, HM3; Beatrice A. Schwab.



APPOINTMENT DESK: Virginia Logan, Linda V. Otero.



SCREENING: William R. Winter, Lieut., MC; Elsie V. Stewart, Lieut. Comdr., NC.



POLIO CLINIC: W. G. Keenan, HM3; Lieut. Winter.



INOCULATION: Corpsman Keenan, Elizabeth Cassel, Don Barcus Cassel.



GENERAL CLINIC: Waynelle Cozby, HM3.



INTERNAL MEDICINE CLINIC: Captain Ralph E. Faucet, MC; Mrs. Marie J. Mendekic.



INTERNAL MEDICINE CLINIC

Henry A. Sparks, Lieut. Comdr., MC; Patient Jane M. Denning. Wilhelmina Brown, HM3; Olive M. Kinley, patient; Erwin L. Samuelson, Lieut., MC.







ORTHOPEDIC CLINIC: George T. Anast, Lieut., MC.

CHART TALK: Lillian M. Reyna, HN; A. Gonzales, HN; Jayne Moody, Lieut., NC.

DEPENDENT CAST ROOM: L. T. Whitten, HM3, and patient.



X-RAY: Pauline Lemich, HMC, X-rays infant.



X-RAY DARKROOM: J. A. Hary, HM2; L. C. Justice, HM1.



ANKLE X-RAY: A. J. Cole, HM3; R. N. Holman, HM3.



FOOT X-RAY: J. S. Raabe, HN.



DEPENDENT LAB: C. E. Robinson, HM2, takes blood specimen.



EMERGENCY ROOM, RECEPTION DESK: G. J. Gelford, Lieut., MC; Margaret B. Jenkins, Lieut. Comdr., NC.



EMERGENCY ROOM: Elsie V. Stewart, Lieut. Comdr., NC; Mary M. Benish, Lieut. Comdr., NC



EMERGENCY ROOM: R. L. Hadlund, Lieut., MC.



EMERGENCY ROOM: Janite C. McHale, HM3; Lieut. Comdr. Jenkins, NC; Lieut. Gelford, MC.



EMERGENCY CREW: A. Gonzales, HN; Jan C. McHale, HM3; Jann C. Gregg, HN; Jean L. Entile, HM2; Margaret V. Williams, HN; Denise Clendennin, HN.



DEPENDENTS LAB: F. Thompson, HM3; C. E. Robinson, HM2.



RADIOLOGY READING ROOM: Lieut. (j.g.) Y. K. Choe, MC (ROKN); Lieut. T. P. Moore, MC; Lieut. F. L. Maher, MC.



CHILDREN'S WAITING ROOM: Leona G. Betz (volunteer Navy Relief).



PEDIATRICS: H. L. Carter, Lieut., MC.



PEDIATRIC CLINIC: H. O. Randel, Lieut. Comdr., MC.



WELL BABY CLINIC: R. J. Gibblings, Lieut., MC.



INFANT CARE: T. F. Miller, Lieut., MC.



CHECK UP: C. E. Inman, Lieut., MC.



EAR EXAM: W. A. Larson, Lieut., MC.



TENDER HANDS: Joyce J. Frederickson, Lieut., NC; J. M. Hubbard, HN.



MOTHER HELPS: P. A. Cato, Lieut., MC; infant and mother, Mrs. Susan A. Mamaril.



FINGER HURTS: Michael A. Hogan, Lieut., MC.



PEDIATRIC CLINIC, CREW: J. D. Garvey, HN; B. A. Baldwin, HN (W); G. Kegler, HN (W); I. Sinski, Lieut. (j.g.), NC.

#### CORONADO ANNEX

The Family Hospital located at South Field, U. S. Naval Air Station in Coronado, was put in operation in August, 1941.

It was financed by private subscriptions, the "take" from the slot machines in the Officer's Club on the Naval Air Station and donations from some of the ships stationed in the Pacific area. There was also a small hospital fee which was paid by the patients.

In 1944 when the Family Hospital was taken over by the Navy it was placed under Civil Service and was a well equipped and solvent hospital with a large surplus in the bank and in bonds.

In 1951 the Family Hospital was torn down to build more runways at South Field for the Jet Planes and the Family Hospital was transferred to Bldg. "Y" until Bldg. 602 located just inside the gate on U. S. Naval Air Station could be remodeled.



NURSES QUARTERS Later Demolished in Plane Crash

In 1955 the U. S. Naval Hospital incorporated the Family Hospital under its jurisdiction and the name was changed from Family Hospital to Coronado Annex.

In 1957 the U. S. Naval Hospital closed the Coronado Annex but the Coronado Annex Clinic just outside the U. S. Naval Air Station gates remained open. All personnel not needed at the clinic were transferred to the U. S. Naval Hospital in San Diego.



ORIGINAL FAMILY HOSPITAL



FAMILY HOSPITAL PERSONNEL



CAPTAIN WILBUR S. LUMMIS, JR., MC, USN Officer in Charge, Coronado Annex



COMMANDER JACK BYRD, MC, USN Incoming Officer in charge, Coronado Annex



EARL ROBBINS, Chief Warrant Officer, MSC Administrative Officer, Coronado Annex



LAUGHING IT OVER: Robert Waitzman, HM1; Mr. Robbins.



ADMISSION DESK: Thomas Colignon, HN; Irma Helmstein, Lieut., NC.



APPOINTMENTS: Thomas Rodgers, HN; Doris Rohrabacher, Red Cross Worker.



NOT FUNNY, DOCTOR: Aliceann Micklos, HN; Ellie Bodi, HN; Stanley A. Leonard, Lieut., MC.



INOCULATION: Sandy Wells, HM2.



OBSTETRICS -GYNECOLOGY: Lieut. Milly Shelton, NC, weighing expectant mother.



MEDICAL STOREROOM: Nedra Neeland, HM2, assisting Joe Struble, HM1, in plant account inventory.



EMERGENCY ROOM: Lieut. Waymen McCoy, MC; Laura Funderburg, HM3—performing minor surgery—removing a plantar wart.



 $LABORATORY:\ Nedra\ Neeland,\ Ben\ Brooks,\ HM1,\ checking\ hematology\ slides\ with\ microscope.$ 



PHARMACY: Verla A. Pask, HM2.



PHARMACY: Barbara White, HM1.

We are told that Verla Pask and Barbara White are the only Waves graduated from Navy Pharmacy Technician's School.



CAPTAIN WILLIAM S. BAKER, JR., MC, USN Chief, Obstetrics and Gynecology Service

# OBSTETRICS AND GYNECOLOGY SERVICE

The Obstetrics and Gynecology Service is primarily concerned with the proper care of all Obstetrical and Gynecological patients coming under its management and with the training of Interns and Residents in the specialty of Obstetrics and Gynecology.

The Chief of the Service is normally the Senior Attending Obstetrician-Gynecologist and is directly responsible to the Commanding Officer via the Executive Officer for the proper management of the Service.

The Assistant Chief of the Service is normally the next Senior Attending Obstetrician-Gynecologist present and is directly responsible to the Chief of the Service for the proper and efficient management of both the Obstetrical and Gynecological Divisions.

The Service consists of both an Inpatient and Outpatient Section. The Obstetrical Inpatient Section consists of four well equipped air conditioned delivery rooms and ten labor beds arranged semiprivately in five rooms. A Recovery Room is located on the Labor and Delivery Room floor for the immediate care of puerperal patients and a Recovery Ward is operated in the general Post Partum Ward area. There are 10 beds in the Recovery Ward and 28 beds on the Post Partum Ward. These latter beds are all semi-private in

individual cubicles. A separate ward for antenatal complications is also maintained. On this ward there are 30 beds and adequate precautions or isolation of contaminated cases are carried out when required. The nursing personnel on all obstetrical wards are separate from those assigned to general hospital nursing functions.

There are 32 beds for the care of gynecological conditions. These beds are generally in great demand due to the very adequate amount of clinical material available for teaching.

The Obstetrical Division consists of both an Inpatient and Outpatient Service. The Inpatient Service includes the Labor and Delivery Room Suite, the Abnormal Obstetrical Ward and the Post Partum Ward; the Outpatient Service includes the New and Old Prenatal Clinic, the Post Partum Clinic and the Abnormality Prenatal Clinic.

The Obstetrical Division is normally administrated by a Senior Attending Staff Obstetrician who is responsible for the performance of the Division.

The General Prenatal Clinic is supervised and operated by the Head of the Obstetrical Division and his house staff with the help of all currently assigned attending Staff Obstetricians and Obstetrics and Gynecology Outpatient Clinic Service. It functions as a combined Attending and Resident Staff evolution.

The Gynecology Division consists of both an inpatient and outpatient service. The inpatient service is both medical and surgical and is called the Gynecology Ward, Building 38-2. The outpatient service includes both Resident and Attending Staff Gynecology Clinics. The Gynecology Division is administered by a Senior Attending Staff Gynecologist.

The Outpatient Service consists of the New Prenatal Clinic, Old Prenatal Clinic, Abnormality Prenatal Clinic, and Post Partum Clinic.

Gynecology Clinic consists of Walk-In Gynecology Clinic, Cancer Detection Clinic, Sterility Clinic, Gynecology Endocrine Clinic, Gynecology Tumor Board, and Presurgery Gynecology Clinic.

The secondary mission of this Service is to train Interns and Residents in the fundamentals of good obstetrical and gynecological practice and to afford ample opportunity for residents to become eligible for certification by the American Board of Obstetrics and Gynecology after the completion of three years of satisfactory supervised training.

The training program is approved for three years by the American Medical Association, American Hospital Association, American College of Surgeons, American College of Obstetricians and Gynecologists, and American Board of Obstetrics and Gynecology. During this period of training the Resident rotates through a planned series of assignments in both Obstetrics and Gynecology as well as spending a minimum of six months on General Pathology. An opportunity is also available for elective work in Urology and General Surgery.

The Interns on Obstetrics are responsible for all histories and physical examinations of labor patients and accomplish a minimum of 12 uncomplicated deliveries under the supervision of the Resident Staff. They also complete all labor records and charts and are responsible for all initial newborn physical examinations and circumcisions.

The Interns on Gynecology are responsible for the histories and physical examinations on all Gynecology admissions and perform minor surgical procedures under supervision of the Resident staff.

The First Year Residents are normally four in number and in the event of a great influx of patients or a shortage of Interns they assist in writing admission histories and physicals. They examine all unusual cases on the wards.

The Second Year Residents are normally four in number. They supervise the activities of the First Year Residents under their immediate jurisdiction. They write an admission summary and progress note on all patients on the Service to which they are assigned. They assure that all interns' histories and physicals and First Year Residents' notes are properly written on each patient's record.

The Third Year Residents are also four in number. The Senior Third Year Resident is designated the Chief Resident and is responsible for the supervision of all residents junior to him and for the management and care of all patients on the Service. The Third Year Residents are expected to visit all patients on their assigned wards daily.

They are responsible for the closing out of all charts on their wards and personally countersign all discharge summaries. They keep the Chief Resident informed of all admissions and discharges on the Service.

Below is a statistical record covering three years of this Service at San Diego Naval Hospital:

	1955	1956	1957
New Prenatal Visits	5,654	4,703	3,166
Old Prenatal Visits	29,697	27,040	16,932
Gynecology Visits	12,974	16,025	15,847
Major GYN Surgery	334	382	346
Minor GYN Surgery	776	703	760
Patients Delivered	4,115	5,752	2,708
Infants Delivered	4,163	5,805	2,737
	(2.3%)	(2.0%)	(2.8%)
Caesarean Section	97	120	81
	(3.0%)	(2.7%)	(3.4%)
Fetal and Neonatal	128	162	92
Mortality	(0.07%)	(0.07%)	(0.037%)
Maternal Mortality	3	4	1





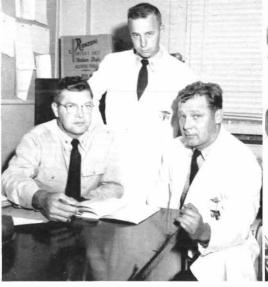


Captain Baker, Marion E. Sarich, (secretary).

# OB GYN



OBSTETRIC-GYNECOLOGIC doctors attend conference conducted by their chief, Captain Baker.



CASE UNDER discussion by Lieutenants W. R. Winter, N. W. Schmitz, J. R. Stenger.



X-RAY STUDIED and discussed by Lieutenants Nick Schmitz, Wes Boucher, Vern Walker, Bill Lucas, Bob Visscher.



LAB REPORT is checked by Lieuts. Richard T. Upton, Edmonston F. Coil, John D. Manhart.



OBSTETRIC MANNEQUIN studied by Lieutenants James McDaniel, William Manson, Larry Trabaudo, John Kane.



BABY CARE CLASSES: Pat A. Cato, Lieut., MC, and Stephanie B. Frank, NC, show mothers how to care for infants.



GENERAL VIEW of Obstetrical waiting room.



NAVY RELIEF visiting nurse confers with Hattie B. Smith, Lieut. Comdr., NC.



PRENATAL CLINIC: Ramona Vemmer, Lieut. (j.g.), NC, takes blood pressure.



EXPECTANT MOTHERS are weighed by Lillian Reyna, HN (W).



CONSULTATION: Lieutenants Stenger, Wagner, Upton and Wade, all MC, discuss obstetric case.



RECOVERY WARD: Mrs. E. V. Staiger, dependent wife, is attended by Miss M. J. Battensby, nursing assistant.



PRENATAL CHECK of blood pressure is made by Jackie Broderson, HN (W).



OBSTETRIC ADMISSION ROOM: Justina Simmons, Ward Attendant, wheels patient in, while Mary P. Mallog, Lieut., NC, and Ward Attendants Mardell Hatcher and Mildred Harness look on.



LABOR ROOM: Doris King, Ensign, NC, and Doris Small, civilian registered nurse, check blood pressure and pulse of expectant mother.



PULSE OKEY: Mrs. Pauline R. Daily, former Lieut. (j.g.), NC, is patient of Lorene J. James, Lieut. (j.g.), NC.

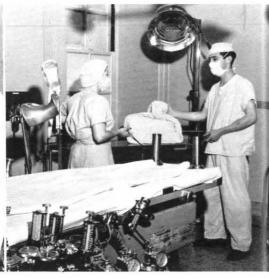
## OB GYN



FATHERS' WAITING ROOM: R. V. Pierce, Sgt., USMC, and B. D. Dixon, AN, USN, work puzzle while they wait.



POST PARTUM: W. R. Winter, Lieut. Comdr., MC. attends Mrs. George Ryder and her twin girls.



GETTING SET: Ensign Doris J. King, NC, and Victor Cox, HN, prepare delivery room.



STERILIZATION: Margaret O'Connor, Lieut., MC, and Andy Bence, HM3, wrap packs for sterilizer.



INSTRUMENTS are sterilized for obstetric use by D. C. Wallace and V. S. Cox, both HN's.



COMPLICATED obstetric case is attended by Louise Adams, Lieut. (j.g.), NC, and E. G. Theros, Lieut., MC.



MEDICATIONS are prepared by Nurse Adams and Elizabeth R. Edwards, civilian nurse.



HELPING HANDS: Mrs. Rosemary Hafer is assisted to wheel chair by Ward Attendant Mary Spellman, Nursing Assistant Maryann Brayes and Ward Attendant Inez Patterson.



MEDICINE is given to Irene Mayo, former Lieut., NC, by Aileen Patterson, civilian nurse.



CHART of case is explained to Civilian Nurses Josephine Dolan and Lucretia B. Southern by Lieut. Upton.



TIDYING UP: Mabel Mathews, Margaret Preston, Patient; Lois Sheffield, nursing assistant.



SURGERY ADMISSIONS are checked by Mrs. V. A. Inman, civilian nurse. Dependent patients are Mrs. A. M. Jenkins (left) and Mrs. M. M. Hocker.



ON WAY TO O. R.: Virginia Porterfield, Lieut. (j.g.), NC, aids patient en route to surgery.



PREPARING room for patient are Lieut, Porterfield and Ward Attendant Cora Mullen.



NURSERY WORK ROOM is occupied by Ward Attendants Sally E. Espy and Denise Padua.



WARD ATTENDANTS Mrs. R. W. Kincy and Mrs. V. Davis work in the dependent maternity unit.



STERILIZING room is operated by Nursing Assistants Mrs. C. L. Freeman and Miss M. J. Battensby.

#### PEDIATRIC SERVICE

The Pediatric Service is headed by a diplomate, American Board of Pediatrics. He is assisted by a diplomate, American Board of Pediatrics, and one Board-eligible pediatrician. There is one second year resident and three residents at the first year level, who will shortly be in their second year of residency. One second year resident is designated as the "senior" resident or resident representative.

There is at times a General Practice resident on the service, for a two-month period. There are four to six interns who are assigned to the service for two months. This may include an intern from San Diego County Hospital.

There are two civilian Board-certified consultants, each of whom spends 24 hours a year for teaching, rounds, etc. There is one chief nurse on each of the two pediatric wards, the main nursery, premature nursery and pediatric clinic. These are assisted by other Navy nurses, civilian nurses, corpswaves, corpsmen and attendants.

The primary function of the Pediatric Service is to provide inpatient and outpatient medical and surgical care for dependents under the age of 13. This includes the care of newborn infants, both full-term and premature, and well-baby checks for those under one year.

The secondary function of the Pediatric Service is to provide training for medical officers in the practice of pediatrics, to enable these officers to meet the standards of competency to practice pediatrics which are established by the American Board of Pediatrics and to qualify for examination by this Board.

It is also the function of the Pediatric Service to provide general pediatric training and experience for interns and general practice residents as part of their training for general practice or specialty in other fields. This general teaching program is extended to include nurses, corpswaves and corpsmen.

The department maintains close liaison with other services. Consultations and advice are given on all dependents of the pediatric age group or on those problems which are common to the pediatrician, regardless of age.



CAPTAIN ERNST R. MOELLER, MC, USN Chief, Pediatric Service

The Pediatric Service is divided into three main branches; the Pediatric wards, Pediatric nurseries, and Pediatric outpatient clinics.

There are two complete adjoining pediatric wards. Each has its own nurses, assigned staff and facilities.

One 29-bed ward is devoted to the care of medical problems (or the strictly pediatric patient), with the exception of a separately enclosed nursery area which handles all bassinette and incubator-sized problem cases regardless of their diagnosis. This ward has one isolation room for semi-contagion. It also contains a treatment room for special diagnostic or therapeutic procedures.

The other pediatric ward of 22 beds is devoted to the general or specialized surgical services. Each service has an allotted number of available beds according to their needs. There is a separate room with separate full-time nursing facilities for tonsillectomy patients. There is also a separate room for infected surgical cases.

Both wards are well-equipped with necessary facilities, such as piped-in oxygen, incubators, croupettes and other special equipment. Both wards have assigned residents and interns, supervised by a staff man.

There is a main nursery which handles all routine full-

term newborns. It is divided into an admitting room plus two other rooms. Routine circumcisions are done here. This nursery handles 30-plus newborns, dependent on need.

The nearby premature nursery, which has a separate staff, is divided into five areas, one of which is used solely by the staff and two of which are used for isolation of suspect cases. It is supervised by one or more specially trained nurses. There is space available to care for 14 premature infants, although this number exceeds the usual census.

Both nurseries have an adequate number of incubators, isolettes and rocker-beds. One pediatric resident, assisted by an intern and supervised by a staff man, is in charge of both nurseries.

A large and well-staffed pediatric outpatient clinic is maintained in a separate area. It includes seven examining rooms, plus two staff offices with examining facilities. One full-time staff man, one part-time staff man, one or two residents and two to three interns maintain the care of the clinic. Residents or interns assigned to other pediatric branches may be added as needed, providing it does not interfere with their other duties. One hundred fifty to 200 patients a day are seen here, by appointment or on a walk-in basis.

In addition, there is a separately located well-baby clinic four afternoons a week for babies under one year. This is directed by the nursery resident under staff supervision. There is also a small pediatric neurology clinic on an appointment basis one morning a week, which is directed by one second year resident and one first year resident, supervised by a staff pediatrician. There is also a weekly pediatric orthopedic clinic run jointly by the Pediatric Department and the Chief of Orthopedics.

The Pediatric Residency Training Program aims to provide each resident a well-rounded experience in all phases of clinical pediatrics. The resident's time is divided among the heretofore described branches. In the course of a year he will have seen and treated practically all of the major pediatric diseases and conditions, including many of the rarer ones as well. The program is planned and equipped for two years.

In addition to the formal teaching periods, there is continual informal teaching of the interns by the residents and staff and of the residents by the staff.

The U. S. Naval Hospital, San Diego, because of its staff, facilities and geographic location, acts as a diagnostic and treatment center for pediatric problem cases from other service activities covering a very broad area. Along with the very large number of service dependents in the San Diego area, this provides the service with a continual supply of excellent teaching cases as well as an abundance of the more routine type of case. All but a selected few patients under 13 years of age are admitted to the Pediatric Service, giving the residents opportunity to follow a wide variety of allied pediatric conditions.



EARLY MORNING CONFERENCE: Left to right: Lieut. William J. Fouty, MC; Captain Ernst R. Moeller, MC; Lieut. Joseph LaBlanc, MC; Lieut. Tommie K. Watkins, MC.



SICK CALL: Left to right: Lieut. Lorraine Schuh, NC; Nurse Holtgrove (civilian); Lieut. Raymond Gibbings, MC; Lieut. Tommie Watkins, MC; Captain Ernst Moeller, MC.



INSPECTION: Captain Moeller, MC; Lieut. (j.g.) Marie Tierney, NC; Lieut. Herbert Eckert, MC; Captain Chrisman, MC.

CORPSMEN

 $\ensuremath{\text{NURSERY:}}$  Lieut. Comdr. Harvey O. Randel, MC.



NURSERY: Mrs. P. I. Holtgrave (civilian nurse).



INSPECTION: Lieut. Charles Inman, MC; Lieut. (j.g.) Mary Crowley, NC; Captain Allan Chrisman, MC.



INSPECTION: Captain Chrisman, Captain Moeller, MC.



Left to right: Billie Vahan (civilian registered nurse); Robert Gough (patient); Dorothy Hamilton (nursing assistant); Ensign Delores Rose, NC.



RETURNING PATIENT FROM OPERATING ROOM: V. O. Mesa, SA; Eula Anderson, P. H. Ham, MMC; Ensign Norma J. Cornwell, NC.

#### **NURSERY**



ADMITTING NEWBORN: Lieut. (j.g.) Patricia Moris, NC; Alabama Owens, HA; Bob Gardner, HM3; Ensign Vicki Harker, NC.



Alabama Owens, HA; Bob Gardner, HM3; Lieut. Ray Gibbings, MC; Ensign Vicki Harker, NC; Baby Riley (girl); Baby Suthers (girl).



Lieut. (j.g.) Patricia Moris with newborn.



PREMATURE NURSERY: Lieut. (j.g.) Rosemary Brzezinski, NC; Isabel Lucero, HA.



WARD TEACHING CLASS: ROCKING BED: Margie Wright, HA; Raymond Morales, HN; Lieut. Elizabeth Berry, NC; Ronald Ahy, HM3.

#### FORMULA ROOM



Margie Wright, HA; Joe Deatherage, HN.



Celeste Musachio, Barbara A. Grace (Corp.Waves).



PRE-TONSILLECTOMY EXAMINATION: Christina Chacon (civilian nurse); David L. Hoppeo, Lieut. Charles Henderson, MC; Michael Carlin, Ensign Bonnie J. Blair, NC.



Children of Navy dependents being admitted by ward nurse for tonsillectomy.



Doctor briefing mothers and children on post ton sillectomy care: Lieut. Henderson,  $\ensuremath{\mathrm{MC}}.$ 



NURSERY: P. C. Bode, HSHA, student feeding infant.



J. F. Cornelius, HA, CO-11, student corpsman, feeding infant.



FEEDING TIME: Lieut. Lorraine Schuh, NC; Mary Robinson, Jackie Stewart, Mary Heath, Mildred Williams, C. F. Richie, HN, and patient children.



WARD: Lieut. Arthur Wartes, CHC; Lieut. Lorraine Schuh, NC; Donna Smith (nursing assistant).



WARD ATTENDANTS: Minnie Davis, Eula Anderson.

## DERMATOLOGY SERVICE

The Dermatology Department is headed by a diplomate, American Board of Dermatology and Syphilology and Fellow American College of Physicians. An assistant, also a diplomate, American Board of Dermatology and Syphilology, completes the officer medical staff.

At the present time four medical officers are undergoing residency type training at this institution. Seven hospital corpsmen and a nurse corps officer assist in the operation of the dermatology ward and clinic. Two of the enlisted hospital corpsmen are certified dermatology technicians.

In addition the residents and staff are assisted by regular visits of six well-known civilian dermatologists. Three of the six attending staff are members of the staff of the University of Southern California.

The Dermatology Department provides the personnel and facilities necessary for the diagnosis and treatment of all types of dermatological diseases and conditions for the active and retired members of the military services and their dependents.

The Department also provides the resident medical officers with the supervised teaching and training and the clinical and laboratory experience necessary to develop the highest type of dermatologist and to enable them to meet the requirements for certification by the American Board of Dermatology and Syphilology.

Further, it provides for the teaching and training of interns and other members of the hospital staff.

Facilities available include a 31 bed ward with facilities for the diagnosis, treatment and follow-up of all types of dermatologic cases of active or retired enlisted personnel. Separate facilities are also available for the hospitalization of pediatric, female and officer personnel.



CAPTAIN WILLIAM N. NEW, MC, USN Chief, Dermatology Service

Also included are six fully equipped examining rooms for the examination, diagnosis and treatment of outpatient personnel; one large and six wall-type electro-surgical units with attachments for various types of electro-surgical procedures; an operating room with equipment for the performance of all types of dermatological surgical procedures, including dermabrasion; a dermatologic laboratory with equipment and facilities for all indicated mycologic, bacteriologic or parasitic examinations and cultures; an X-ray room with dermatologic therapy apparatus for indicated superficial X-ray irradiation procedures; an ultra-violet ray therapy room with apparatus of the hot and cold quartz types and Wood's lights for all types of ultra-violet irradiation procedures, and a medical camera and photographic equipment for dermatologic color photography and a file of over 3,000 35mm. color photographs of representative dermatological entities.

STATISTICS FOR THE YEAR 1957 show that clinic patient visits totalled 14,117, and treatments and surgical procedures totalled 8,742.

By any standards this is a modern, well-equipped service and will compare favorably with any similar department anywhere, military or civilian.

# **DERMATOLOGY**



 $\label{eq:surgical derivative} SURGICAL\ DERMABRASION:\ Lieut.\ Grimmett,\ MC;\ Williams,\ HN;\ Comdr.\ Jenkins,\ MC.$ 



RECOVERY FROM DERMABRASION SURGERY: L. W. Osburn, AMC.



SURGERY: Lieut. James Wade, MC; Comdr. Jenkins, MC.



DERMATOLOGY CONFERENCE: Captain New, Lieut. W. Brothers, MC; Comdr. C. E. Kee, MC; Lieut. W. Narva, MC; Comdr. Judson Jenkins, MC; Lieut. R. Grimmett, MC.



SICK CALL: Comdr. Jenkins, MC; Lieut. Narva.



BIOPSY SURGERY: M. K. Williams, HN; Lieut. Grimmett, J. A. Rodriguez, CS3 (patient).



LABORATORY PROCEDURES: J. W. McDuffee, HM2; J. E. Feil, HN.



PATIENT CHART FILE: D. A. Wakefield, HN.



OUTPATIENT CLINIC: R. E. Merritt, HM3.



CENTRAL SUPPLY ROOM: M. K. Williams, HN.



WARD 20-1 NURSES STATION: Lieut. (j.g.) Syble Brode, NC; Lieut. (j.g.) Mildred K. Fisher, NC.



Lieut. Brothers, MC, treating wart with liquid Nitrogen.

#### PHARMACY SERVICE

The Pharmacy is under the direction of the Chief of Pharmacy Services, who supervises all the Pharmaceutical Service at the U. S. Naval Hospital and the Coronado Annex.

The Chief of Pharmacy Services is responsible for all official correspondence and records pertaining to Pharmacy, maintenance of manuals, directives and letters, procurement and maintenance of Master Drug Reference Files, literature and Pharmacy library. He is directly responsible for the safeguarding, care, accounting and proper issue of all drugs.

The Pharmacy Officer makes recommendations for the stocking of new drugs and supplies information regarding the efficacy, availability and economy of non-standard items. And he is responsible for on-the-job training of personnel.

The Pharmacy Supervisor is responsible for overall supervision of the Pharmacy, including compounding and manufacturing of drugs, filling and dispensing of prescriptions, cleaning detail and performance of personnel.

The Pharmacy Supervisor is responsible for over-all superof Stock Control, Compounding, Ward Orders, Outpatient Prescriptions and Pre-packing. Each section is under the supervision of a Pharmacy Technician.

The technician in charge of the Stock Control Section supervises the ordering, receipt, storage, and issue of drugs and maintains inventories of standard stock as well as openpurchase items. He trains personnel in stock control and assists in general pharmaceutical work as required.

The compounding section is where all bulk preparations are manufactured and special prescriptions for the outpatient section are compounded. The technician assigned to this section maintains a manufacturing schedule, formula index and inventory. He maintains the stock for the prepacking section, trains personnel in compounding and assists in general pharmaceutical work as required.

The technician in charge of the Ward Order Section is responsible for the proper filling, labeling and dispensing of all drug orders for wards, departments and clinics. He maintains inventory of stock and usage rate of issues. He provides re-labeling services as required and performs general pharmaceutical work in other sections.

The function of the Outpatient prescription section is to fill all prescriptions, military or civilian, for authorized persons who are not patients in the hospital. The prescriptions are presented at the incoming window, where the identification card is checked, the name is verified, and the number of prescriptions presented written on each one. The prescriptions are then given to the typist, who types the label and passes it along for filling. At the dispensing window, the label is checked against the prescription, the item is verified, the label is numbered and applied, the general appearance is checked and the medication is issued. It is the responsibility of the technician in charge to maintain the stock and to supervise all of the above procedure.

The purpose of the pre-packing section is to package the bulk medications prepared by the compounding section into the size bottles and jars most commonly dispensed by the outpatient section. Tablets are also pre-packed. The person in charge of this section is responsible for the proper filling, identification, labeling as required and maintenance of a reserve stock.

One Pharmacy Technician is assigned to the Coronado Annex for the filling of outpatient prescriptions. The technician so assigned is responsible for the maintenance of stock, receipt, labeling, accurate filling, numbering, appearance of final product and dispensing to the patient named. Supplies and compounding services are supplied by the Pharmacy at U. S. Naval Hospital.



COMMANDER JOHN BERETTA, MSC, USN Chief, Pharmacy Service President, San Diego Society of Hospital Pharmacists

In addition to working in the sections assigned, all technicians are called upon to assist in any other section if required. The technicians are rotated from section to section.



OUTPATIENTS: Jackson Mewborn, HMC.



WEIGHING INGREDIENTS: J. J. Steil, HM1; J. A. Lewis, AN.



WARD ORDERS: M. G. Stanford, HN; G. B. Moulthrop, HMC.



PREPACKING — Right to left: H. A. Monahan, HM3; C. G. Freeman, HN; D. R. Sperry, HM3; M. G. Stanford, HN.

Non-technicians are rotated at more frequent intervals to enable them to become acquainted with all phases of Pharmacy.



BUSY PHARMACISTS: Paul Peterson, HMC; Chief Mewborn; Barbara White, HM1; Monte Stanford, HN.



PACKAGING: H. A. Monahan, HM3.



FILLING ORDERS: Chief Mewborn.

#### CHEST SERVICE

The Chest Service of the U. S. Naval Hospital, San Diego, California, has been designated by the Bureau of Medicine and Surgery to be the Pulmonary Tuberculosis Center for the West Coast. In addition, it has also been designated a Pulmonary Coccidioides Center for the Navy.

The function of the Chest Service is to provide inpatient diagnostic and therapeutic facilities for active duty personnel, retired personnel and Veterans Administration Beneficiaries suffering with chronic diseases of the respiratory system. Consultation service on an outpatient basis is also provided for dependents, active duty personnel, and retired personnel.

One hundred seventy-six beds are available for the treatment of chronic pulmonary diseases and are designated as follows: Ward 21-3 — 60 beds — diagnosed cases of pulmonary tuberculosis; Ward 21-2 — 58 beds — admission ward for cases as yet undiagnosed; Ward 21-1 — 58 beds — non-tuberculous chronic respiratory diseases.

Weekly medical-surgical staff conferences are held for the purpose of considering cases suitable for surgery.

Insofar as possible the ultimate goal of this service is to return as many personnel to active duty in as short a time as possible.



CAPTAIN EDGAR RICEN, MC, USN Chief, Chest Service



CAPTAIN RALPH G. STREETER, MC, USN Ward Medical Officer



CHEST SERVICE—NURSES AND CORPSMEN: Left to right: Lieut. (j.g.) Patricia Slater, NC; P. M. Smith, HN; A. G. Cole, HA; D. L. Decker, HN; Lieut. Comdr. Olive Wilkinson, NC.



CHEST SERVICE — Lept to right: B. D. Ripphun, HN; R. N. Oldemeyer, HN; Lieut. (j.g.) Barbara Bates, NC; C. D. Marshall, HN; L. L. Kincaid, HN.

TREATMENT ROOM — Le/t to right: Lieut. (j.g.) Sidney A. Kudlich, NC; J. E. Riff, HN.



UN-DIAGNOS TUBERCULOSIS: J. E. Riff, HN; B. Stockbridge, HN; Lieut. (j.g.) Sidney Kudlich, NC; T. L. Ardis, HN.



A PLANK OWNER: Guy Austin, Sgt. (USMC) (Ret.); Lieut. (j.g.) Helen Crenshaw, NC.



CHECKING PATIENT'S CHART — Left to right: A. G. Cole, HA; P. M. Smith, HN; Lieut. (j.g.) Patricia A. Slater, NC; J. T. Gamble, SN (patient).



PATIENTS: William Cookston, Sgt., USA (Ret.); I. E. Orr, SMC; H. S. Fowler, MEC (Ret.); R. M. Bania, Pfc. (USMC); E. O. Dick, SN; L. H. Barneburg, AA.



TREATMENT (BENNET PRESSURE MACHINE): A. G. Cole, HA; William Cookston (patient).



PATIENTS: L. H. Barneberg, AA; E. O. Dick, SN; I. E. Orr, SMC; R. M. Bania, Pfc. (USMC); William Cookston, Sgt., USA (Ret); H. S. Fowler, MEC (Ret.).

#### HOSPITAL SUPPLY DIVISION

The Hospital Supply Division serves the Naval Hospital by providing the necessary logistic support for the procurement of all supplies and equipment, both of a medical nature, as well as general supply items; it handles the procurement of all new equipment and makes all necessary procurement for contracts for services for such items as utilities and general service contracts. In addition to procurement functions, the Hospital Supply Division is responsible for the warehousing and issuing of these supplies.

The Hospital Supply Division is composed of four branches.

The Procurement Branch is responsible for the procurement of many open purchase items not normally carried in the regular supply channels. It purchases by means of an imprest fund (petty cash) many hundreds of small items on a quick one-time basis. It also prepares the request for large equipment items, sometimes running into thousands of dollars for a single item. This branch is composed of civil service workers who are listed as "buyers" and invoice clerks.

The Stock Control Branch is responsible for the ordering of all standard supply items from the various supply centers around the country. It maintains records of each stock item, the usage rate, and the cost of these items.

The Material Branch is composed of storage rooms, warehouses, and receiving department. It is responsible for receiving and checking all incoming supplies, the proper storage, separation, and care of all these materials. This branch has separate storerooms for medical items, general supply items and industrial type items. It is responsible for the issuing of all supplies and the periodic inventories conducted. The personnel to manage this branch are composed of civil service warehousemen.

The fourth branch is the Provisions Branch which, although attached to the Food Service Division, also is a part of the Hospital Supply Division and is responsible for the ordering, storage, and issuing of all provisions.

The Hospital Supply Division personnel are basically composed of civil service personnel of which there are twentyfive and, in addition, two officers, one Chief Petty Officer, and four corpsmen.

The Hospital Supply Division annually spends approximately three to four million dollars of the hospital budget for the procurement of supplies and equipment to maintain the many functions of the naval hospital. It handles approximately 7,000 items in the storerooms. In addition to serving the naval hospital, it also provides logistic support for the Hospital Corps School and the Preventive Medicine Unit No. 5. In addition, the Hospital Supply Division is responsible for the training of military personnel in the procurement of oxygen and the handling of oxygen problems.



LIEUT. DOUGLAS E. HAGGIN, MSC, USN Chief, Hospital Supply Division



HOSPITAL SUPPLY DIVISION: Left to right: Maxine Thompson, (secretary); Lieut. Douglas E. Haggin, MSC, USN; Frederick Stauffer, CWO, USN (Assistant Chief, Hospital Supply Division).



STOCK RECORDS: Dorothy E. Carr; Cleo R. Adams, (supervisor).



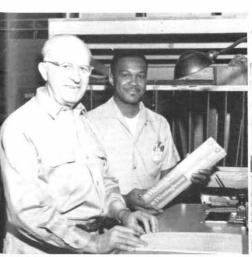
STOCK RECORD BRANCH: Carol Love; Pauline Cavarra; Cleo Adams; Betty Baker; Betty Kilroy; Mazie Nyberg.



PURCHASING UNIT: Jewell Green; Bertha Emge; Thelma DeForrest; Lillian Miller, (supervisor).



INVOICING: Esther Smith; Esther Hart; Lillian Miller; Thelma Barbour; John Seubert.



INDUSTRIAL STOREROOM MATERIAL BRANCH: D. G. Hughes, (supervisor); J. B. Funches.



TECHNICAL-REVIEW: Bill Mead, HM3; Joe Beauchamp, HN; Louis Ciancio, HM1.



OXYGEN ENCLOSURE: W. L. Meade, HM3; J. R. Beauchamp, HN. Piped to building 15, 22 and 26.





MATERIAL BRANCH MEDICAL STOREROOM: J. A. Edwards; B. M. Karr; R. B. McAvoy, (supervisor); B. L. Davis; W. R. Mollison; J. A. Rotar, (branch head).

MATERIAL BRANCH RECEIVING SECTION: Mike Perillo; John Rotar; Jim Molen.





MATERIAL BRANCH RECEIVING SECTION: John Rotar; Phil Olds, (supervisor); Bob Greenlaw, (receipt control liaison).

HOSPITAL STOREROOM: P. G. Olds (supervisor receiving section); R. B. Mc-Avoy (supervisor medical storeroom).



MEDICAL STOREROOM: Bryce Karr; J. A. Edwards; Bob McAvoy (supervisor).



MEDICAL STOREROOM: Bryce M. Karr; Berline A. L. Davis; Bill Mollison.

#### FINANCE DIVISION

The main function of the Finance Division is to budget and account for the more than \$6,000,000 allotted this hospital by the Bureau of Medicine and Surgery to operate for one year. In addition to this amount, the annual pay for military staff is about \$6,000,000, bringing the total operating costs to over \$12,000,000 a year.

The Chief, Finance Division, is assisted by a Budget Specialist in the preparation of the annual budget and the hospital quarterly financial plan.

Of the \$6,000,000 allotted this hospital more than \$3,000,000 is used to pay the salaries of some 700 civilian employees; \$1,000,000 is used for the procurement of food for patients and staff, and a like amount goes for the supplies that are used daily such as drugs, medications, office supplies, and cleaning gear; another \$500,000 is used annually for the purchase of services and supplies that are not available through the regular supply system; the annual utilities for the hospital cost approximately \$125,000 — this includes electricity, gas, and water; the purchasing of new equipment is in the neighborhood of \$65,000 a year, and \$60,000 is spent for maintenance, repair, and alterations of the buildings and grounds. The annual telephone and printing bills come to about \$50,000.

The job of maintaining records and accurate accountability of all funds allotted falls on the Fiscal Branch of the Finance Division.

Due to the many and varied accounting procedures necessary to account for over \$12,000,000, the Fiscal Branch has been divided into five main accounting sections. The Property Accounting Section is responsible for accounting for



LIEUT. COMDR. OMAR A. TUNKS, MSC, USN Chief, Finance Division

more than \$20,000,000 worth of government property that makes up this command; the Stores Returns Section maintains summarized accounting records for the provisions and supplies issued throughout the hospital; the Allotment and Cost Accounting Section maintains a day-to-day allotment cost record of all expenses incurred by the hospital; the Time and Leave Section keeps records of all civilian employees' time cards and leave status; and the Collection Agent maintains accounting records of all money paid to the hospital for hospitalization. This covers dependents, retired personnel, and Veteran patients.

The Property Branch has two sections. The Equipment Handling and Issue Section is responsible for issuing and moving, when necessary, all hospital equipment and the Property Inventory Section continually maintains a day-to-day inventory of all equipment and conducts equipment surveys of worn-out and obsolete property.

In the Finance Division there is a training billet for an Administrative Intern in Financial Management. This billet is for one year and is designed to train a Medical Service Corps officer to become a Finance Officer of a naval hospital.

FINANCE DIVISION: Edna Doswald, Secretary; Charles J. Moore, Ensign, MSC, Financial Management Intern; D. W. Madsen, HMC, Division Chief Petty Officer; Maxine Fournier, Budget Specialist; Lieut. Comdr. Tunks; J. H. Hennessy, Lieut. MSC, Assistant Chief, Finance Division.





FISCAL: Catherine M. Gaines, Head, Fiscal Branch.



ALLOTMENT, COST: Kathryn Lowry, Patricia Laughon, Margie Franklin, Gertrude Bliven, Elizabeth Kimmel, Yvonne Stillwaugh, Supervisor.



TIMEKEEPING: Doris J. Maxon, Elsie M. Burt, Supervisor, June A. Johnson.



PROPERTY ACCOUNTING: Lola W. Hitt, clerk; S. C. Strombom, Supervisor; Ann M. Irwin, clerk.



STORES RETURNS: Audrey O. Lyman, Blanche R. Dunlap, Supervisor.



FINANCE EQUIPMENT: R. O. Brogi, C. C. Randolph, M. M. Alling, H. L. Johnson, all HN's; E. W. Frisk, HMC.



COLLECTIONS: James J. Nielsen, Fiscal Accounting Clerk.



COLLECTION AGENT: A. B. Axson.



C. O. Keeter, Equipment Storekeeper.



LIEUT. COMDR. JOHN W. GAULT, MSC, USN Chief, Operating Service

# OPERATING SERVICES DIVISION

The Operating Services Division exercises general over-all supervision of the Office Service Branch, Laundry and Linen Control Branch, Custodial Branch, Photographic Branch and the Watch Officers Branch.

This Division administers the Hospital Directives System.

The Chief of the Division is the Building Superintendent of the 1,000 Bed Surgical Wing, Space Officer, Postal Officer, Photographic Officer and Telephone Officer.

There are 24 military and 69 civilian employees assigned to the various Branches of this Division.

The Office Services Branch provides for the Mail and Messenger Section which receives, sorts and distributes official incoming mail, collects and dispatches official outgoing mail and maintains the Central Correspondence files and a follow-up system on "Action" mail. This Section also operates the Hospital Messenger Center.

The Forms and Reports Control Section administers the forms control program, local and other forms, arranges for printing and reproduction work, procures blank forms and maintains stock control.

The Central File and Records Disposal Section which supervises the Central File Room, maintains the records retirement and disposal program and provides technical guidance on records management program.

The Telephone and Information Section provides for the operation of the central switchboard of the hospital, preparation and maintenance of a current telephone directory for the hospital and operation of the call system.

The Postal Directory Section maintains a directory service for routing of U. S. Mail and delivers U. S. Mail from the Post Office to Wards and Departments.

The Laundry and Linen Control Branch provides for the operation of the Hospital Laundry, performs dyeing, disinfecting, and sterilizing of linen, blankets, clothing and similar government owned property. A central control over the issuance, storage, and repair of linen is maintained. This entails issuing linen to Wards and Departments as required, establishing a linen allowance list, conducting linen inventories, reporting excessive losses, making necessary repairs, and maintaining supplies of non-repairable linen for use as cleaning rags.

The Photographic Branch provides all photographic services for the Hospital and the Hospital Corps School.

The Custodial Branch provides janitorial, cleaning and related services for the Hospital as required.

The Watch Officer Quarters Branch maintains the housekeeping functions, a twenty-four hour corpsman Watch and Telephone Watch for Medical Watch Officers.

A Medical illustrator attached furnishes service in the Field of art to requesting activities of the hospital.



LAUNDRY BRANCH



CENTRAL FILES: Liberty Dimitriou; Rose S. Silver, Elizabeth A. Sullivan.



FORMS ISSUE: B. G. McCormick, HN; J. Morgan, HN; E. J. Bischop, HMI.



MEDICAL ILLUSTRATOR: Art Hatten.



FORMS ISSUE: D. P. Pagen, SO3; Margaret B. Griffith.



CO's MAIL ROOM: Ralph E. Lehnhardt, HM1; George Aycock, HN; Sam Vereen, HM1.



SORTING MAIL: Aycock, Lehnhardt, Vereen.



PHOTO LAB: Lawrence B. Ruth, HMC; Wayne L. Bracken, HM2.



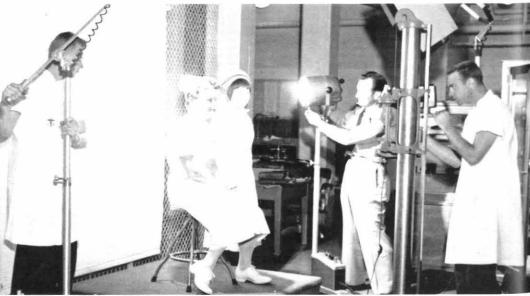
PHOTO MICROGRAPH: Chief Ruth, Bracken.



FOCUSING: Robert W. Bishop, HN.



ENLARGING: Bishop at work.



NURSES pose for studio shot.





TELEPHONE EXCHANGE: Elizabeth G. Luster; Spasmina L. Hill; Audrey M. Corbett.

SWITCHBOARD: Iva M. Walton; Gusta M. Finney; Edna R. Anderson; Lillian D. Rose.



Left to right: Audrey Corbett; Eloise M. DeSantis; Bernice F. D'Amico; Betty C. Braunschmidt; Elizabeth Luster.



GENERAL VIEW of board.



POSTAL DIRECTORY: J. P. Hosden, HN; R. C. Jackson, HM3; K. W. Pool, HM1; J. J. Wilborn, HM3.



POST OFFICE: Pool, R. K. Good, HM3; Frank Fountain.

SORTING, BAGGING: D. E. Reynolds, L. W. McMeeken, Fountain.



LAUNDRY BRANCH: R. A. Anderson, Quarterman in Charge; C. G. Nonez, Leadingman.



DRYING: D. Gallardo; R. E. Adkins; R. Rogers.



SORTING: F. C. Myers, S. G. Peatten.



PRESSING: Maria Kennedy; Susie M. Soto; Blanche L. Seals; Edith K. Johnson.



SEWING: Mary K. MacFaden; Grace H. Banta; Helen H. Johnson.



ISSUING: Margaret G. Soens; D. H. Wilkins, supervisor; Myrtle O. Sprague.



FOLDING: Luella M. Anderson.



WASHING: E. W. Redmon; R. E. Adkins; Gallardo.

#### FOOD SERVICE DIVISION

Occupying the entire first-basement level of the new surgical wing, the Food Service Division is the largest naval hospital food service facility in the United States, preparing and serving more than 2,500,000 meals and special diets annually for the patients and staff of the hospital and the students of the Hospital Corps School.

The division, which operates under the direction of a Medical Service Corps officer, consists of three main branches.

The Administration and Stores Branch orders, receives, inspects, stores, issues, and accounts for approximately \$1,000,000 worth of perishable and non-perishable provisions each year. Under the supervision of a Chief Medical Service Corps warrant officer the personnel of this branch also support the operation of the division's other branches by providing essential services in many phases of the division's over-all mission.

Headed by a Chief Quarterman (Commissary) and staffed completely by career Civil Service employees, the Food Preparation and Service Branch is responsible for all aspects of food preparation and service, except those relating directly to special diets. This branch, by far the largest in the division, operates the main galley, butcher shop, bake shop, salad unit, vegetable preparation room, four dining rooms, two large dishwashing pantries, and the ward food service distribution unit.

The planning, preparation, and service of special diets is accomplished by the Therapeutic Diet Branch under the supervision of qualified Nurse Corps and Medical Service Corps dietitians who maintain liaison with the professional



QUENTIN L. BROWN, CWO, USN Assistant Chief, Food Service Division



LIEUT. COMDR. JOHN H. BING, MSC, USN Chief, Food Service Division

staff of the hospital on all matters of diet therapy and who also provide instruction in dietary planning and treatment to patients and staff members requiring it. The therapeutic diet kitchen, which is located adjacent to the main galley and staffed by Civil Service employees, prepares and serves an average of 1,000 therapeutic diets of various types each day.

The work of the division extends virtually around-theclock, seven days a week. A full meal is prepared and served at midnight to the seventy members of the hospital night crew. Preparations for breakfast begin as early as 0400 daily and employees of the division work as late as 2000 following service of the evening meal.

One of the most interesting features of the main galley is the ward tray assembly table where, using assembly line techniques, employees assemble from 800 to 1,000 regular and therapeutic diet trays each meal for delivery to the wards by means of fifty tray carts.

A monetary ration allowance for provisions, prescribed by the Secretary of the Navy, governs the amount of money which may be spent for the food used in the regular and special diets and the supplementary nourishments which are furnished to patients on the wards.

The division has undergone a complete reorganization during the past year and a complete physical relocation. Five separate kitchens were closed and their functions assumed by the central galley and the ward food service was converted from a decentralized bulk food cart system to the centralized tray assembly operation.



GALLEY FOOD SERVICE CREW: J. S. Thomas, HN; C. I. Lamph, HN; R. A. Ross, HM1; J. H. Cabaniss, HMC; A. E. Headtke, HM1; R. R. Reschke, HM1; L. N. Close, HM1; E. V. Gooselaw, HM2; E. A. Kindred, HN; B. D. Philley, HN; R. E. Durden, HN.



CONFERENCE: Mrs. M. L. Pina, Head Cook; R. W. Steinbach, Commissary Chief Quarterman.



ACCOUNTING, CLERICAL: Betty F. Dean; Dorothy A. Wagner; Donna L. Jordan.



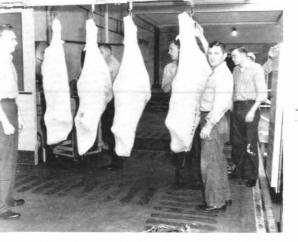
DIETICIANS, in Special Diets Office: Lucille Clark, Lieut. Comdr., MSC; Kathy Goggin, Lieut., NC; Martha Svete, Ensign, MSC; Louise Olson, Lieut. Comdr., NC.



WAVE REPRESENTATIVE is Lieut.. Comdr. Clark.



CASHIER: R. A. Durden, HN, gives receipt to St. Onge, HM1, who pays cash because he receives commuted rations. A. J. Sanford, SD1, and B. T. Hines, BM3, galley Master at Arms, "witness" transaction.



FOUR PRIME BEEVES ride overhead track.





CUTTING UP: Butchers F. F. Barton, C. M. Warner.



CHECKING: Warehouseman L. J. Feiring bosses dry provisions.



CARVERS are D. Quines, H. I. Gonzales.



PREPARING TURKEY: Robert Driskill, Mrs. Minnie Hamilton, Hom Gee, Carlos Garza, Marshal Hill.



MORE CARVERS: R. A. Kanatzar, Oscar Barreiro, L. G. Anderson.



 $\operatorname{BUTCHER}$  SHOP crew ready to do a little cutting up: H. L. Goodpasture, H. T. Turville.



ISSUING DRY PROVISIONS: Close, Thomas, Philley.



WARD DINNERS being prepared for belt transmission to patients: Mesdames L. C. Nelson, C. A. Butler, N. J. Parks.



BAKE SHOP: Preparing pastries are G. W. Baskette, J. H. Entreken, W. Bell, C. Acosta, P. J. Van Doren, baker in charge; D. Longo, J. Diaz.



FLIPPING FLAPJACKS: Cooks, Miss Ramona Rodriquez, W. Segal, Miss Grace Faulkner, E. Pappas.



GALLEY GRILL: Civilian cooks grilling meat in the Main Galley as Head Cook watches.



BATTERY OF KETTLES goes into action: Joe Moreno, Morford Grayson, Walter Segal, C. Garcia.



CONVEYOR BELTS for ward service, regular diets left, special diets 142 on right.



FOOD PREPARATION PERSONNEL operate conveyor belt.



OFFICERS DINING ROOM serving line manned by Mrs. Tresa Randall, Mrs. Marie Foster, Mrs. Leona Wilson, Marie Williams.



OFFICERS dining room in action.



CHIEF PETTY OFFICERS are served in CPO dining room by waitress Francis Cummings.



CPO's served by Mrs. Hilda Devore in CPO Dining Room.



GENERAL VIEW of Chief's Dining Room.



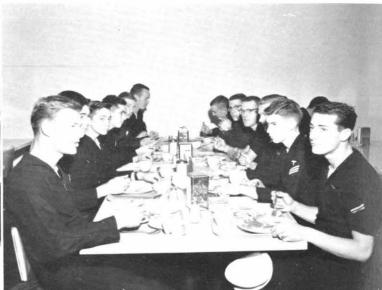
MAIN DINING ROOM: Serving line manned by Miss Nona Smith, Mrs. Dora Sorrel.



CREW IS SERVED by Ray Phillips, Mrs. Roberta Coleman, Peter Dranes.



CORPS SCHOOL Students seem to like the food.



MAIN DINING ROOM: Always has customers.



GENERAL VIEW OF Crew's main dining room.



TAKING EMPTY trays to scullery. (Looks like rain!)



COMDR. GERALD Q. THACKER, CEC, USN Public Works Officer

The Public Works Division is the engineering, maintenance and construction organization of the hospital. It employs 150 civilians, four enlisted men, the Public Works Officer and his assistant.

In order that adequate medical care for patients can be assured, it is essential that electricity, heat and water are available at all times and that hospital buildings and equipment are kept in a proper, safe working condition.

Ambulances and other official motor vehicles must be properly maintained and operated safely.

Besides the busy present, there is always the future to plan for. Many weeks each year are spent under the direction of the Public Works Officer in assessing the needs for buildings and improvements, replacements and major repairs. Each year a submission to the Navy Department must be made of a long range plan for major improvements. Upon this plan depends the money which will be granted by Congress to carry out these improvements.

During the past two years a Controlled Maintenance Program has been implemented. Its purpose is to obtain the most maintenance for the least cost. It aims to discover and correct discrepancies while they are still little ones, thus avoiding costly repairs and disruptions of service. This program requires the constant and energetic effort and cooperation of Maintenance Control personnel, supervisors at all levels, and in fact, everyone in Public Works.

### PUBLIC WORKS DIVISION

The Public Works Division has the following branches: Administrative, Insect and Rodent Control, Maintenance Control, Building, Utility, Grounds, Transportation and Design. All these branches, with the exception of the Administrative and Insect and Rodent Control Branches, are under the direction of the Foreman Mechanic. He is assisted by the Maintenance Scheduler who schedules work to be done by the shops at a time when men of different trades can be made available and all necessary material is on hand so that jobs can proceed without loss of time.

The Administrative Branch provides office services for the division such as stenographic, typing, files and preparation of reports. This branch also administers the hospital safety program.

The Insect and Rodent Control Branch is in charge of a Chief Petty Officer who is assisted by two enlisted men. This branch inspects for pests and unsanitary conditions and carries out control measures for pests.

The Maintenance Control Branch performs those aspects of the Controlled Maintenance program having to do with inspecting, planning and estimating and issuing of job orders for work to be performed by the maintenance shops. Records are kept and reports prepared for the purpose of evaluating the maintenance effort.

The actual maintenance work on all types of buildings and equipment, grounds and utility systems is performed by the Building, Utility, and Grounds Branches. They also accomplish minor improvements and alterations. Supervisors and artisans in these branches have to be versatile and able in many things besides their primary trades because of the complexity of special hospital equipment.

The Building Branch, in charge of a Maintenance Quarterman, has a Carpenter Section, Electric Section and a Paint Section.

The Utility Branch, in charge of a Utilities Quarterman, has a Plumbing Section, Sheetmetal Section, Machine Section and Heating Plant Section. The Grounds Branch, in charge of a Roads and Grounds Quarterman, has a Grounds Section, Cement Section, General Detail Section and Incinerator Section.

The Transportation Branch, in charge of a Transportation Quarterman, operates and maintains hospital motor vehicles. Ambulance service is furnished around the clock. This branch also conducts examinations for U. S. Government Operator permits.

The Design Branch prepares drawings, specifications and cost estimates for work to be accomplished by Public Works personnel and for project submissions. It maintains a file of maps and plans of hospital facilities.



DISCUSSION: C. W. Brown, civilian clerk, talks it over with Irving W. Little, CWO, MSC, Assistant Public Works and Safety Officer.



SCHEDULING: C. C. Sloane, maintenance scheduler, L. G. Preibisius, foreman mechanic.



PLANNING: N. L. Miller, Planner and Estimator, Mr. Preibisius.



MAINTENANCE CONTROL CREW: J. A. Dougherty and O. A. Taylor, Inspectors; Helen Rivera, Secretary; W. H. Grant, Receptionist; and Mr. Miller.



CONFERENCE: James I. Bailey, Leadingman Electrician; James G. Edgil, Leadingman Painter; L. E. Durkee, Head Carpenter; C. M. Preibisius, Leadingman Carpenter; E. F. Pledger, Head Electrician; S. H. Stuart, Maintenance Quarterman (seated).



DRAWING: Mrs. R. P. Coverley, Draftsman.



FLOWERS, TOO: W. F. Watson, Leadingman Gardener.



NURSERY CREW: Top row: D. V. Moody, Watson, J. B. Heck, Joe Salgado, J. G. Butler, M. Sola. Middle: R. E. Soto, J. T. Bergamo, P. Clet, I. Giacalone, G. Brunetto, L. Ramos, L. C. Anthony. Bottom: J. Malbrough, G. F. Driggs, Ray Vandevier, F. Q. Lopez, W. Montgomery, R. Harber.



PLUMBING, STEAM: Front row: C. O. Mann, G. E. Hanlon, R. Weaver, B. L. Peterson. Back row: G. C. Moody, Head Pipefitter; T. E. Penrod, W. J. Scanlan, W. C. Lassiter, F. E. Best, J. L. Simkins, M. S. Frazell, Leadingman Plumber.



SHEET METAL WORKERS: W. H. Schultz, Head of Shop; Archibald, J. T. Jarrett, Valentine.



ELECTRIC SHOP: Back row: H. Housenga, R. E. Evison, F. F. Wrieden, A. F. Atwater, H. H. Remple, A. E. Evers, G. B. Thornton, C. O. Smith. Front row: F. M. Neese, E. F. Pledger, Head Electrician; A. L. Pinkerton, J. I. Bailey, Leading Man; A. J. Larkin, L. R. Miller.



CARPENTER SHOP: C. W. Wolber, L. E. Durkee, Head Carpenter; Harry Jones, C. M. Preibisius, in charge; G. W. Henderson, D. A. Vincent, Joseph Prihoda, A. L. Ernest, R. R. Baker, J. S. Ferreira.



LATHE OPERATOR: T. A. Greene, Machinist.



LOCKS: R. M. Taylor, Locksmith.



BENCH JOB: C. J. Bergeron, Machin-



TOOLING DOWN: W. Cain, Machinist; S. D. Nash, Head Machinist.



SIGN SHOP: W. H. Ellis, A. Craig, Painters.



SPRAYING: W. C. Jones, Painter.



LOCKER JOB: D. E. Alzona, Painter.



HEATING PLANT: W. E. Flinn, L. G. Bryant, S. G. Erro, W. V. Harvey, J. D. Wallace (seated).



PLANT OPERATORS: A. J. Choquette, Fireman; A. J. Cavarra, Engineman.



HEATING PLANT: D. E. Oncale, Fireman; J. C. Schmittner, Fireman; Engineman Cavarra.



MORE OPERATORS: L. G. Bryant, Leadingman Engineman; Fireman Choquette, Fred S. Taylor, Engineman.



TRANSPORTATION: J. W. Allen, Dispatcher; L. S. Orr, Leadingman; E. H. Barnes, Quarterman.



TRANSPORTATION CREW —  $Top\ row$ : W. C. Dobbs, A. Weinblatt, L. S. Orr, Leadingman; J. W. Rall, E. H. Barnes, Quarterman; T. W. Anderson, R. E. Conrey, Oscar Van, R. H. Weaver, J. K. Taylor.  $Bottom\ row$ : J. W. Allen, D. W. Keegan, K. S. Mullins, W. W. Lamb, Daniel Willis, Automotive Inspector.



ONCE OVER: Daniel Willis, Automotive Inspector; R. E. Conrey, Cost Accountant.



SHOP JOB: J. R. Richards, Auto Mechanic.



SANITATION: E. M. Cassell, HM3; R. L. Stanley, Jr., HM1; P. V. Robinson, HMC.

The Personnel and Records Division, under the guidance and supervision of Chief of the Division and two assistant Personnel Officers, is composed of approximately 50 civilian employees and 48 military personnel.

This division is responsible for the supervision of matters pertaining to the administration of the military and civilian personnel attached to this hospital, both staff and patient. The Division also is responsible for the proper custody, security and current maintenance of the service and medical records of the staff and patient personnel.

The Personnel and Records Division is subdivided into six branches; Administrative Branch, Staff Military Personnel Branch, Patient Personnel Branch, Staff Civilian Personnel Branch, Training Branch and Teletype Branch.

The Administrative Branch accomplishes clerical procedures incident to the periodic physical examination of individuals on the disability retired list; replies to inquiries from next-of-kin relative to the condition of patients; processes bills for medical services rendered by civilian institutions and physicians and submits NavMed U, report of medical treatment, hospitalization and allied services required; accomplishes clerical work for the Chief of the Division, maintains division master file of the Navy Department and local instructions and Notices, and disseminates information to segments of the division as applicable; maintains current changes to all manuals held by the Chief of the Division and routes all incoming official mail addressed to the Division.

The Staff Military Personnel Branch accomplishes clerical procedures incident to the administration and maintenance of the staff enlisted and officer personnel; assists in the instruction of enlisted patient personnel and the administration of examinations for advancement to enlisted patient personnel, including the administrative procedures incident thereto. This branch is subdivided into two sections; the Staff Officer Section and the Staff Enlisted Section.

The Patient Personnel Branch is responsible for the administrative procedures pertinent to the admission, treatment and disposition of patients; compiles statistical data incident to the hospitalization of patients; maintains and insures security of patient's service record; accomplishes administrative procedures incident to the appearance of patients before various clinical and medical survey boards; maintains close contact with the Marine Liaison Unit and Air Force Liaison Unit at this hospital and with the Army Liaison Unit at Fort MacArthur, on matters pertaining to members of their service; maintains close contact with Ward Medical Officers to insure that entries for patients' health records are complete and correct; administers the hospital cross index system for clinical records; arranges for funerals and the disposition of the remains of deceased personnel; supervises the receipt, storage and disposition of personal effects of patient personnel; coordinates all matters regarding outgoing and incoming patients via air. The Patient Personnel Branch is subdivided into five sections; Admission, Bag Room, Reports and Statistics, Supernumerary and Patient's Records Sections.

The Staff Civilian Personnel Branch is subdivided into four sections: Employment and Employee Relations; Employee Services; Training; Wage and Classification. General functions of this branch are to plan, develop and administer the employment, wage, classification, employee relations and employee service programs for the civilian staff of the hospital.



LIEUT. COMDR. ROY F. CREECH, MSC, USN Chief, Personnel Records Division



LIEUT. THOMAS LEWIS, MSC, USN Asst. Personnel Officer

The Training Branch coordinates all training for military personnel, except the intern and residency training program.

The Teletype Branch transmits official messages over the NTX apparatus at this hospital; transmits all Western Union Messages released over the Western Union Teletype Machine; receives and distributes all messages received; processes and insures delivery of personal Western Union messages for patients and staff at this hospital; prepares and submits reports as required for the proper functioning of the Branch.



ASSISTANT PERSONNEL OFFICERS—Left to right: Earl B. Robbins, CWO; Richard W. Ricker, CWO; Lieut. Thomas W. Lewis, MSC; Lieut. (j.g.) Thomas G. Cooper, MSC.



ADMINISTRATION BRANCH—Left to right: Jo Singer, William J. Auton, HM1; Myrtle M. Strakbein.



STAFF OFFICERS PERSONNEL: Karen Tilley, Maxine Kinder, (supervisor); Eva Norman.



STAFF MILITARY PERSONNEL BRANCH: C. R. Dick, HMC; V. A. Veach, HM1; E. Boling Jr., HM1; B. C. Evans, HM1; Anne Ott, F. M. Hamaker, HM2; Eunice L. Kepner, E. B. Robbins, CWO



STAFF ENLISTED SECTION: J. E. Beddoe, HM1; R. W. Sexton, HMC; E. Boling, HM1.



R. W. Sexton, HMC, giving instructions to the Personnel Duty Section.



RICHARD W. RICKER, CWO W-3 Assistant Personnel Officer



ADMISSION OFFICE PERSONNEL: C. E. Rieck, HM3; J. Gemoules, HN; R. L. Sims, HN; K. W. Simons, HN; H. Calhoun, HN; P. Gomez, HM3; E. J. Wallace, HMC; R. D. Larson, HM3.



ADMISSION DESK: James Gemoules, HN; Dieter Hauke, HM3.



BAGGAGE ROOM: (patients) A. G. Bedord, HN; R. H. Oxley, HM3; G. W. Dixon,



"F" CARDS AND STATISTICS SECTION: Ella B. Campbell (supervisor); Kay McCready; D. E. Neely, HN; Marie Lokey.



PERSONNEL STATISTICAL SECTION: Mildred Lee, Ruth Henderson, Arlean Burks, Dolorise Bellegarde (supervisor).



CLINICAL INDEX UNIT: Edith L. May; Ethelyn McElwee; J. Nichols, Jr., HN; R. J. Schloer, HN.



SUPERNUMERARY SECTION: Mildred Lexa; Marjorie Underwood.



OFFICER PATIENT PERSONNEL: Frances R. Brown; Carl H. Frost (Supervisor); Joan E. Audrain.



TRANSFER UNIT: Patricia McCarthy (supervisor); Darrell Parkinson, HM3; John H. Moore, HM3; William G. Gates, HM3; Thomas Womack, HM3; Darreld D. Dack, HM3; Nancy Hamblin.



ENLISTED PATIENT PERSONNEL UNIT: R. Rivera, HN; P. L. Osman, HM3; Mary R. Ray (leave desk); Frances A. Weidner (transfer desk); Caroline E. Chisholm (personnel account); Ferne Cusich (supervisor).



HEALTH RECORD WRITE-UP: Marie Gay; Betty Carlson; Tillie Piper; Irene Rosteck; Mae McKinney (supervisor).



VITAL STATISTIC SECTION: L. Marsh, HN; Glenda Powell; Mildred Halligan (supervisor); Clara Stirewalt.



CLERICAL BOARD MEDICAL SURVEY UNIT — Left to right: Irene J. Haye; Frances Morales; June A. Scharr; Isabelle M. Deming; Lucille Blake (supervisor).



SEPARATION SECTION — Left to right: Dorothy Scroggs; Solita Somers; Priscilla M. Calderon.



PATIENT ARCHIVES AND INSURANCE: Opal F. McCarthy; Barbara C. EuBanks.



EMPLOYEE SERVICES SECTION: Helen R. Adamson



CIVILIAN PERSONNEL BRANCH AND EMPLOYMENT SECTION— Left to right: R. D. Meyer; A. J. Prato.



CIVILIAN EMPLOYMENT SECTION — Left to right: Vicky S. Kaupas; Flora R. Albano (employment superintendent); Betty W. Davis.



WAGE AND CLASSIFICATION SECTION — Left to right: Page L. Betar; Evelyn E. Atkinson (head).



ENSIGN ROBERT L. WHITE, MSC, USN Training Officer



D. A. Sandoval, HMC (Training Branch Supervisor); J. D. Plumb, SN (Student); R. F. Plank, HM3.



Hospitalman Chief David A. Sandoval giving indoctrination lecture to reporting hospital corpsmen from Hospital Corps School.



Dallas E. Cassel, HM1; Raymond F. Plank, HM2.



TRAINING SUPERINTENDENT COORDINATOR OF CIVILIAN TRAINING: R. D. Meyer.



NAVAL HOSPITAL DIVISION, SAN DIEGO CITY SCHOOLS, ADULT EDUCATION PROGRAM, "TRAINING BRANCH," USNH, BLDG. 153; F. D. Koski, Pvt. (USMC); A. Bosch, HMC; N. E. Parish, Pvt (USMC); M. J. Walsh, ICFA; V. B. Null, Prof. B.A. and M.A.; D. G. Doering, HN.



MESSAGE CENTER — Left to right: J. H. Moore, HM3; W. G. Gates, HM3; R. H. Peterson, HN; Penny A. Barte (supervisor).



REHABILITATION AND OUTSIDE MAA — Left to right: P. Wyckoczki, HMC; R. B. Stanich, HM1.



PHYSICAL EXAMINATION CENTER AND INDUSTRIAL HEALTH OFFICE: Lieut. Vernon A. Burkhart, MC.



PHYSICAL EXAMINATION CENTER AND INDUSTRIAL HEALTH OFFICE —  $Lejt\ to\ right$ : J. C. Hoekstra, HN; H. S. Swain, HN; M. W. Moore, HM1 (W); A. L. Pumilia, HN; O. F. Townsend, HMC.



MEDICAL LIBRARIAN: Sherrill E. McMillian.



OPERATING PHOTOSTAT MACHINE: D. F. Davis, HM3.



LIEUTENANT FRED E. LIEDTKE, MSC, USN Security Officer

## SECURITY AND MASTER AT ARMS DIVISION

The Security and Master at Arms Division of U. S. Naval Hospital, San Diego, is divided into three branches: the Administrative Branch, the Master at Arms Branch, and the Fire Protection Branch.

The Master at Arms Branch is also divided into three sections: Inside, Outside and Quarters Master at Arms.

The Security Officer is responsible for the security of all the hospital's grounds and buildings and the safekeeping of all government property located within the area. He is also held responsible for the efficient operation of the Fire Department, and for the management and operation of the male Hospital Corps Quarters.

The Administrative Branch of the Security Office makes all investigations and prepares reports on the results of those investigations for forwarding to the Legal Office and the Commanding Officer. The Inside Master at Arms is responsible for maintaining good order and discipline, and he enforces compliance with Navy Regulations and observance of Naval Customs by patient and staff personnel.

The Outside Master at Arms is required to maintain adequate records of patients in the Rehabilitation Program, and to assign patients to details as approved by the Executive Officer. He is also required to assist the Inside Chief Master at Arms in maintaining good order and discipline on the Station.

The Quarters Master at Arms administers the billeting of staff Hospital Corpsmen, supervises the cleaning and upkeep of the Hospital Corps Quarters and maintains order in the Quarters.

The Fire Protection Branch, under the Fire Chief, is responsible for fire prevention, fire fighting and periodical inspections of the entire compound to detect and eliminate fire hazards.



Ensign James O. Bryan, MSC; Carla E. Harven, (secretary); Lieut. Liedtke.

SECURITY PERSONNEL — Left to right: Ensign Bryan, MSC, Assistant Security Officer; C. L. Stonecypher, HN; K. M. McDaniel, HM1; P. J. Drdul, HN; C. L. Blind, HN; Carla Harven, (civilian); E. L. Whitley, HM1; F. L. Truman, Jr., HMC (SS); Lieut. Liedtke, MSC.



SECURITY ADMINISTRATION — Left to right: E. L. Whitley, HM1; K. A. McDaniel, HM1; F. L. Truman, HMC.



PASSIVE DEFENSE OFFICE: H. W. Heckman, HMC (ss).



INSIDE MASTER-AT-ARMS: J. Carlisle, HM2; H. L. Postel, HM3; F. L. Garner, HM3; C. E. Ludwick, HMC.



INSIDE MASTER-AT-ARMS; C. E. Ludwick, HMC; H. L. Postel, HM3.



TRAFFIC: R. W. Allen, HN; L. L. Davis, HN.



INFORMATION DESK: F. L. Garner, HM3.



IDENTIFICATION CAMERA: C. L. Stonecypher, HN; Carla Harven.



INSIDE MASTER-AT-ARMS: J. Carlisle, HM2.



BARRACKS MASTER-AT-ARMS CREW: William J. Reimer, HN; Barbara J. Stevenson, HM2; Roger K. Good, HM3; Joe Deatherage, HN; Richard E. Merritt, HM3; John C. Coons, HM1 (seated), CBMAA.



FIRE DEPARTMENT: A. J. Schmidt, (Captain); S. B. Shields, (Chief); H. R. Bow, (Captain).



FIRE DEPARTMENT PERSONNEL —  $Top\ row$ : C. W. Seth; O. O. Benhard; H. R. Bow; S. B. Shields, (Chief); A. J. Schmidt; J. N. Green; T. R. Lawrence; K. A. Heath; B. J. Hazzard.



FIRE DEPARTMENT: J. R. Lawrence.



FIRE DEPARTMENT: J. N. Green.



FIRE DEPARTMENT: J. N. Green; H. R. Bow; J. R. Lawrence.



FIRE DEPARTMENT: H. R. Bow; J. N. Green.



FIRE DEPARTMENT: J. R. Lawrence.

#### SPECIAL SERVICES DIVISION



LIEUT. JAMES W. RICHARDSON, MSC, USN Special Services Officer

The Special Services Division is charged with providing and administering a well-balanced program of indoor and outdoor recreation for staff and patient personnel.

The Division is headed by a Medical Service Corps officer who is assisted by an athletic director, a stenographer-book-keeper, a property clerk, two librarians, two Station-paper editors, and several other enlisted personnel, who are well qualified to perform their share of the various functions of the Divisions. All personnel are military, except the two librarians and the stenographer-bookkeeper.

The Division is divided into an Administrative Branch, a Recreation Branch, a Library Branch and a Property Branch.

The Administrative Branch administers the Recreation Fund, maintains accounting records on all receipts and disbursements of recreation funds, and accomplishes the necessary clerical procedures for the efficient administration of the Division.

The Recreation Branch is charged with administering the

Recreation and Entertainment Program and exercising control over the use of the Recreation Fund for recreational purposes. This branch is responsible for periodic shows, nightly movies and arranging parties for all hands. The physical fitness program is also administered by this branch. These activities include the operation of a nine-hole golf course, two tennis courts, a swimming pool and the hospital athletic field. Both intramural and varsity sports are included in the program.

The Library Branch furnishes patients and staff members with adequate organized collections of books and other materials intended for educational, informational, technical, reference and recreational reading.

The Property Branch maintains prescribed records of all recreation fund equipment and supplies and maintains an adequate stock of such materials. Numerous supply and equipment items are maintained for checking out to authorized personnel on a returnable basis. This is a very popular service in that it obviates the necessity of many personnel buying items, such as camping equipment.

Many of the programs and activities performed by the division stem from recommendations submitted by the Enlisted Recreation Committee, which is composed of enlisted members from the various departments, who represent all enlisted personnel on the compound. The Committee meets once each month and submits recommendations to the Recreation Council which is composed of three officers. The Recreation Council meets and recommends action on the Enlisted Committee's report to the Commanding Officer. This system affords representation to all hands, since each person can voice his opinions and desires to his committee representative.

Most of the expenses connected with Special Services functions are paid from the Recreation Fund, which consists of profits derived from the operation of the Navy Exchange. Each month the profits from the Navy Exchange are forwarded to the Navy Ships' Store, Brooklyn, New York,



John H. Jackson, HMC, Athletic Director; Woody H. Medley, HM1, Petty Officer in Charge; Mrs. Bessie Hudson, Secretary-accountant.

where apportionments are made between the Ships' Store, the Bureau of Naval Personnel Central Recreation Fund, and this hospital. The funds received by the Hospital each month depend largely on the Navy Exchange's profit as well as on the number of military personnel attached, quartered or in a transient status at the Hospital, Hospital Corps School and Preventive Medicine Unit No. 5. A certain percentage of all funds received from this source is forwarded to the Eleventh Naval District Fund, which is known as the Command Fund.

The Chief of the Division coordinates the Hospital Recrea-

tion Program with that of the Hospital Branch of the American Red Cross in order that the maximum benefit may be afforded to all eligible personnel.

It is obvious that the Special Services Division plays an important role in maintaining the desired state of morale of all hands. It follows that the personnel charged with performing Special Services functions must have a keen understanding of the recreational and entertainment needs of patient and staff personnel in order to administer a successful program.



Lieut. Richardson and Secretary.



SPECIAL SERVICES STAFF—Kneeling: Jim D. Fouts, Richard Grubb, Jim J. Skiles, James H. Summerlin, all HN, and Medley, HM1. Standing: Lieut. Richardson; Chief Jackson and Wayne D. McCullough, Franklin D. Airington, Robert J. Hemenway, all HN. (Not pictured are staff members Charlie R. Egle, HM3, and Phillip J. Sandello, HM2.)



NEWSMEN INTERVIEWING: Phillip J. Sandello, HM2, Editor of hospital newspaper,  $The\ Dry\ Dock$ , and Jim Summerlin, HN, newspaper's photog, get "dope" from Mrs. Hudson.



MAKE-UP TIME: Summerlin, in his capacity as Dry Dock's associate editor, works at design of next issue.



LIFEGUARDS "SITTING BY" at Hospital Pool: Jim Fouts, HN, Charles Egle, HM3.



CHECKING OUT GOLF clubs: Richard Grubb, HN; Wayne McCullough, HN.



 $\ensuremath{\mathsf{PROJECTIONISTS}}$  : Jim Fouts and Jim Skiles get set to show nightly movie.



Three views of League Competitors in Recreation Hall's Bowling Alleys.



Pool enthusiasts use tables in Recreation Hall's lounges.







HOT TIME IN THE OLD TOWN: Here are six small segments of a very large party that was held at San Diego's U. S. Grant Hotel early in 1958 for and by the enlisted members of the USNH staff. Plenty to eat, enough to drink, top flight entertainment, dancing marked a memorable evening of fun for all. Door prizes carried off included a TV set, Hi-Fi set, movie camera and fine leather luggage.

#### NAVY EXCHANGE

The Navy Exchange at USN Hospital, San Diego, is a Branch of the Central Navy Exchange for the San Diego Area, with headquarters at the Naval Training Center. Responsibility for the operation of the Hospital Branch rests with the Exchange Officer of the Main Exchange.

Over-all management and technical control over the operation of Navy Exchanges is vested in the Chief of the Bureau of Supplies and Accounts. The responsibility of the Commanding Officer for and his authority over the Exchange at this command is the same as for any other unit of the command.

The Navy Exchange is divided into seven units: Retail Sales Section, Food Service Section, Services Section, Laundry and Dry Cleaning Unit, Tailor and Uniform Unit, Barber Shop and Beauty Salon Unit and the Service Station Unit.

The Retail Sales Section is responsible for providing authorized patrons with goods and services required for their contentment and well-being. Buyers, through the Navy Ship Store Office, range the markets to obtain merchandise at the

lowest practicable cost to the customer.

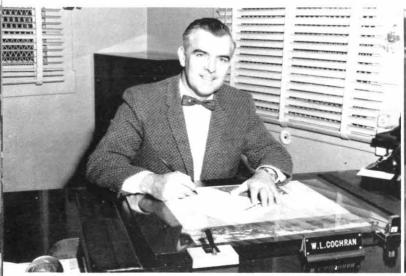
The Food Service Section is responsible for maintaining a high degree of sanitation at food servicing locations.

The Services Section is divided into five units: laundry and dry cleaning, tailor and uniform shop, barber shops and beauty salon, and the service station.

The Laundry and Dry Cleaning Unit receives and sends all personal clothing to be processed at the Training Center; the Tailor and Uniform Unit receives items of clothing to be mended or altered, and stocks items of Officers' and Chief Petty Officers' uniforms for cash sales; the Barber and Beauty Salon Unit provides barbering services at both the hospital barber shop and to bed patients, and provides military and dependent personnel with beauty services at the salon in the Recreation Building; the Service Station Unit makes cash sales of regular service station items and services.

The Navy Exchange personnel consists of fifty-two civilians and two ship service men.

A canteen cart makes several trips through the wards each week for the convenience of the bed patients.



WALTER COCHRAN Navy Exchange Branch Manager



LANORA HOFFMAN Store Manager

WALTER COCHRAN Navy Exchange Branch Manager

NAVY EXCHANGE GROUP: Lorraine Brask; Florence Suit; Barbara Douglas; Jerry Rohrer; Betty Hess; Walter Cochran; Ruth Fritz; Lanora Hoffman; Janice Wilhelm; Laurene Haag.





OFFICE: Ray Chrisman, SH3; Helen Bell (Cashier).



CHECKING LINE; Laurene Haag (Cashier); Thelma Hartman (Sacker).



MOBILE CANTEEN: Ray Chrisman, SH3-Patients.



WAREHOUSE: F. B. Place; A. C. Graupner in charge.



SNACK BAR: Laura Alden; Sarah Sanchez.



SNACK BAR, NURSES GROUPED AT TABLE: Ensign Dorothy A. Yelle; Lieut. (j.g.) Sarah Gealsha; Ensign Vicki Harker; Lieut. (j.g.) Sidney Anne Kudlich; Ensign Lucille G. Emond.



CAFETERIA: J. W. Larkins in charge.



CAFETERIA.



CAFETERIA: Dorothy Payne; Jackie Shira; Amelia Williams; Joshua Nash; Shirley Williams; Cammie Miller; Vickie Carvajal (night supervisor).



CAFETERIA: Top row: June Gunter; Vesta Lutz; Elisbeth Schnorf; Elisbeth Fowler; Mercedith Sue Upton. Bottom row: Bernice Cratice; Sarah Sanchez; Martha A. Caldwell (supervisor); Juanita Johnson; Helen Esmidina.



BARBER SHOP: Sam Mays; Fred Pinkerton; Fletcher Small; Mike Valverde; Chuck Woods; Delbert Warfel.



BARBER SHOP: Mike Valverde; Chuck Woods; Delbert Warfel.



LAUNDRY AND DRY CLEANING: Louise B. Darsie; L. W. Musgrove, CSSN (patient); Mabelle H. McGovern; Roxy C. Thomson; Ruby M. Putnam (supervisor).



BEAUTY SHOP: Alberta J. Yearwood; Rose M. Schad; Gladys D. Patterson (manager of shop).



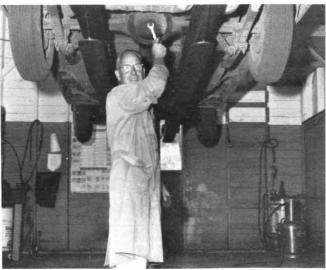
SERVICE STATION: Roy Hurlburt; John Kingswood; H. A. Aab; Bob Baldwin; George Herbener; Albert A. Zander.



GENERAL VIEW OF SERVICE STATION.



SERVICE STATION: J. Kingswood.



SERVICE STATION: G. H. Herbener.

### DISBURSING DIVISION

The Disbursing Division is responsible for the payment of military personnel assigned to the hospital, the preparation and payment of public vouchers, and the accounting for public funds.

The Division furnishes transportation requests, meal tickets and other advances, and provides clothing and small stores services. The Division also holds patients' money and valuables for safekeeping as requested.

The Disbursing Division is divided into four branches,
Military Pay Accounts, Fiscal, Public Voucher and Transportation, Clothing and Small Stores.

The Military Pay Accounts Branch prepares and maintains pay records of all naval personnel, both staff and patient, attached to the Hospital, and processes all changes in the pay status of personnel; it computes amounts of pay due, prepares money lists, and pays personnel; it receives and processes requests to register or stop allotments; and it processes pay records of personnel released, retired or discharged.

The Fiscal Branch prepares checks for payment of public vouchers, and accounts for checking funds; it maintains daily balance sheets; prepares monthly requests for the allotment of funds, certificates of deposit and money requisitions; it reconciles Treasury statements; prepares and submits



LIEUT. (j.g.) STUART D. WECHSLER, SC Chief, Disbursing Division

monthly financial returns, including supporting vouchers; and it receives from the Collection Agent monies for dependents' hospitalization and subsistence.

Public Voucher and Transportation Branch prepares public vouchers for the payment of mileage and per diem claims and for the transportation of dependents, military escorts, household effects, and insures that supporting papers are completed; it issues government transportation requests and meal tickets and makes necessary travel reservations; prepares monthly travel reports, computes travel allowances upon discharge of persons from the Hospital and maintains records of public vouchers paid, including refund vouchers.

The Clothing and Small Stores Branch operates the clothing and small stores issue and bulk storerooms; requisitions and stocks stores items, accounts for cash received from sales, and assists in monthly and other inventories of stores.



DISBURSING CREW: W. H. Hogarth, W-4; Lieut. (j.g.) Wechsler; Lillian M. Kennedy, Eunice B. Hunt.



SMALL STORES: J. J. Warner, TE3; R. N. Prieto, FM; P. E. Gilliand, SKC.



MILITARY PAY: Frances Buccellato.



SET FOR PAY LINE: Ruth Irons, Evelyn Cardani, Helen Kinczel, Marcia Mecord, Lotus Anderson, Hazel Butts, Rosalie Helm, Miss Buccellato, Mrs. Kennedy.



CASH HANDLERS: Peggy C. Mandeville, Dorothy R. Ray, F. D. Wilson, DK3; Mrs. Hunt.



SAILOR'S FAVORITE LINE-Pay Line!

### LEGAL DIVISION

The Office of the Counsel provides legal services for the command, and for active duty and retired military and naval personnel and their dependents upon request.

This office consists of two main branches, a military law branch and a civil law branch. It also has a reporting and secretarial unit whose personnel consists of two civil service employees. All other persons assigned for duty in the Office of the Counsel are members of the naval service.

The officer in charge has dual titles, "legal officer" and "legal assistance officer."

The title "legal officer" has application to his being head of the military law branch. Whether he bears the title of "legal assistance officer" or "legal assistance referral officer" depends upon whether or not he is a qualified lawyer, the former title being applicable in the event he is and the latter being applicable in the event he is not. The incumbent is a fully qualified attorney.

The function of the military law branch is to handle all official matters of a legal nature pertinent to the command. It handles liaison with other military and civilian law enforcement agencies, and is responsible for receiving, interviewing, and assisting all persons who come aboard this station on legal matters, including naval and military investigating officers, police officers, adjustors, attorneys, and other individuals in similar capacities.

Likewise, the cases of military personnel attached to this command, staff and patients, who have been reported for commission of alleged offenses, are processed through the military law branch in preparation for disposition by the



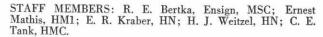
LIEUT. COMDR. WOLFGANG E. KLOSTERMANN, MSC, USN Chief, Legal Division

commanding officer. The military law branch also prepares appointing orders for courts-martial and various types of investigative boards, and prepares such reports and other correspondence as are necessary to carry out its mission.

At the present time, there is an assistant legal officer assigned to the Office of the Counsel for training purposes. He assists the legal officer in matters over which the military law branch has cognizance and, in the legal officer's absence, takes action on such military law matters as he is qualified to handle. The enlisted members of the military law branch are under the direct control and supervision of a chief petty officer whose responsibility it is to see that the work assignments given by him to those members are carried out, and to assist in the smooth functioning of this branch.

The function of the civil law branch is to provide legal assistance for active duty and retired military and naval personnel and their dependents who have personal legal problems. By regulation, service personnel who are not law-yers are prohibited from counseling individuals in respect to personal legal problems and from rendering any other legal service ordinarily provided by an attorney. Accordingly,







READING BRIEF: Chief Tank, Ensign



COURT REPORTER: Lillian Salyers

most of the services provided by the civil law branch are performed directly by the legal assistance officer. These include counseling persons in various fields of law, some of which are domestic relations, injury due to negligent situations, contracts, federal-state taxation, landlord and tenant regulations, real estate transactions, agency, wills, partner-ships, trusts, and negotiable instruments.

Under certain conditions, letters relative to legal disputes in which they are involved are prepared for the signatures of the persons seeking legal assistance. The legal assistance officer may not file pleadings or make court appearances for such persons or otherwise actively represent them in legal controversies. In those occasional instances in which it appears the services of a civilian attorney are necessary, the person seeking the legal assistance is advised, after his case has been discussed with him, to obtain the services of a civilian lawyer of his own choice or, if he knows none, he is

directed to a civilian agency established for the purpose of referring persons to civilian lawyers upon request.

The number of persons availing themselves of the services of the civil law branch has steadily increased in the recent past, and now averages eighty persons a month. The legal assistance officer also prepares opinions on various medicolegal matters for the Command from time to time as the need therefore arises.

The reporting and secretarial unit, as its name implies, furnishes to both the military law branch and civil law branch all clerical services. This includes the taking, transcribing and typing of records of courts-martial and of investigative proceedings and hearings. Also, all correspondence initiated by the officer in charge of the Office of the Counsel and all legal documents prepared for persons who have sought assistance from the civil law branch, are dictated to and typed by personnel of this unit.

# Mission and History of the U. S. Naval Hospital Corps School

The primary mission of the Hospital Corps School is to train selected men in the basic duties of the Hospital Corps.

The present Hospital Corps School was established at the U. S. Naval Hospital, San Diego, California, on 1 September 1928 and operated until April 1935, when it was placed in an inactive status. In April, 1935, the school was re-activated and has been the only Hospital Corps School in continuous operation since that time.

On December 7, 1941, the school was located in Building 119 on the hospital reservation. It had a student body of 327, and the staff consisted of six male officers, four nurse corps officers, and seventeen enlisted men.

In January, 1942, the school was moved to Buildings 211 and 219 in the hospital annex of Balboa Park. During 1942, the average number of students was increased to 616 and 6,476 hospital corpsmen were graduated that year. In 1943, the average number of students increased to 1,300; 9,544 were received and 8,918 graduated.

The year 1944 brought many changes to the school. To meet the needs of a rapidly growing organization, the school was again moved to Unit No. 3 of the hospital, which was well suited to the needs of an expanding school, consisting of 33 acres of park land in Balboa Park. Five former exposition buildings were utilized to house administrative offices and berth a majority of the personnel. One tent section was retained to house approximately one thousand men. Five additional buildings, built while this area was occupied, were utilized as heads, showers, commissary, and mess-halls. Thirty-two temporary buildings were moved into the area and equipped as classrooms. During this year, a total of 10,245 students were received and 8,897 graduated.

In July, 1944, the Hospital Corps School, Great Lakes, Illinois, was closed and 456 students were transferred here from that school command to complete their course of instruction.

In 1945, the school reached its peak enrollment, with an average of approximately 3,400 students on board. During this year, 13,332 students were enrolled and 14,907 were graduated. The staff at that time consisted of eighteen male officers, thirty Nurse Corps officers, 200 enlisted men, and 27 civilians.

In 1946 the average strength dropped to approximately 600 due to demobilization. In June, 1946, the school vacated its quarters in Balboa Park and moved to its present location on the hospital reservation. From 1 January 1947 to 1 July 1948, the average student strength dropped to 337, and the staff was reduced to six male officers, five nurses, eighteen enlisted men and five civilians.

In February, 1949, enlisted women began reporting for instruction. They were trained under a co-educational plan until August, 1953, when all basic training of enlisted women was undertaken by the Hospital Corps School, Bainbridge, Maryland. A total of 678 enlisted women were graduated from here.

Since moving to its present location in 1946, the Hospital Corps School, San Diego, has operated under four different training schedules: an 8 week schedule consisting of 320 hours of instruction; a 12 week schedule consisting of 480 hours; a 16 week schedule encompassing 640 hours of instruction; and a 20 week schedule with 760 hours of instruction.

At present, the school operates under two schedules; a 16 week course for volunteers, and a 12 week course for reservists. There is also a 2 week accelerated course for inactive reservists performing annual training duty.

There are presently 8 classes under instruction, classes ranging from 45 to 80 students each. Among the students there are members of friendly foreign services undergoing instruction. At present, there is a Chief Hospital Corpsman from the Chinese Navy, and also a Mexican physician. In the past, the school has graduated members of the Korean Navy, Colombian Navy and Peruvian Navy.

During the past year, an average of 1,260 students graduated. They were transferred to naval hospitals, station hospitals, and large dispensaries, for additional practical training before going to sea or to duty with the Fleet Marine Force.

The subjects taught are Anatomy and Physiology, Minor Surgery and First Aid, Preventive Medicine, Principles and Technics of Patient Care, Materia Medica and Toxicology, Pharmacy and Metrology, Basic Bacteriology and Elementary Laboratory Technic, and Radiological Safety. All instructors are well-qualified graduates of the Instructor's School, most of whom have had previous teaching experience.

Instruction in the Principles and Technics of Patient Care is begun in the first week and continues throughout the sixteen week curriculum with a total of two hundred hours provided in didactic instruction and practical experience. A nurse is assigned to each class and is assisted in demonstrations, supervision of student practice and administration of examinations by other nurse instructors.

During the first fourteen weeks instruction is confined to the school but in the fifteenth and sixteenth weeks a total of six days clinical experience is provided at the naval hospital. To reinforce the learning experience of the student the nurse instructor for the class furnishes follow-up ward supervision.

Lectures and lecture-demonstrations embrace the development and application of sound principles and associated skills necessary for giving competent care to the sick through learned techniques and procedures. Included are: introduction to concepts of patient care team; admission, transfer and discharge of patients; baths and bedmaking; vital signs; charting; administration of medications; oxygen therapy; use of suction apparatus; diet in health and disease; selected diagnostic tests, including selected laboratory procedures; and application of basic skills to the care and treatment of patients with specific diseases requiring special nursing care.

To enable the student to develop manual dexterity and skill, supervised practice follows demonstration in bed making, bed baths, technic for taking temperatures, pulse, respiration and blood pressure; administration of oral, subcutaneous and intramuscular injections; surgical aseptic technic and charting.

Clinical facilities available for practice consist of one ward with forty bed units and a nursing supply room which is equipped with such items as dressing carriage, stretchers, oxygen tent, suction machines and demonstration trays set up for use in the teaching of nursing procedures, catheterization and bladder treatments.

All nineteen nurse instructors hold baccalaureate degrees.

In addition to the above officers, there are 5 male MSC officers, a chief medical service warrant, and 63 enlisted men on the staff.

On 9 September 1957, a class "C" Pharmacy School was established, with an enrollment of thirty-two hospital corpsmen. Designed to train them in sciences necessary to qualify them as pharmacy technicians, the 38 week curriculum includes Principles of Pharmacy, Operative and Dispensing



FLOYD ANGLIN, HN, USN, is awarded the Hugh E. Perkins Trophy for being the Hospital Corps School's outstanding student. Commander Crawford made the presentation while Mrs. Perkins looks on. The trophy honors the name of Chief Perkins, USN, Corps School instructor, who died last January.



CHIEF PETTY OFFICER Erh-wu HSU, Chinese Navy, being welcomed aboard the School by Commander Crawford. "Looking on" — via their photos on bulkhead—are U. S. Navy's Surgeon General Admiral Hogan, and China's Navy Surgeon Admiral T. S. Yu.

Pharmacy, Chemistry, Pharmaceutical mathematics and parenteral preparations.

The quota for the second class which convenes on 30 June 1958 was established at 35 and there is a strong indication that future classes will be expanded to sixty.

In March, 1958, the Bureau of Medicine and Surgery authorized the establishment of a class "B" Advanced Hospital

Corps School, the first class of fifty students to convene in September, 1958, with an additional fifty students every three months. The purpose of this six month course is to give additional training to senior hospital corpsmen, qualifying them for duty independent of a medical officer.

The Commanding Officer of the Naval Hospital is also Commanding Officer of the Hospital Corps School.

#### HOSPITAL CORPS SCHOOL EXECUTIVE OFFICERS

- COMDR. DANIEL HUNT, MC, USN July 1928 to Dec, 12 1930
- COMDR. C. B. CAMERER, MC, USN Jan. 1931 to June 1931
- COMDR. FRANK HAIGLER, MC, USN July 1931 to July 1933
- COMDR. W. A. VOGELSANG, MC, USN April 1935 to May 1937
- COMDR. J. H. CHAMBERS, MC, USN June 1937 to June 1938
- COMDR. W. J. C. AGNEW, MC, USN July 1938
- COMDR. E. C. CARR, MC, USN Aug 1938 to Aug 1939
- COMDR. L. H. RODDIS, MC, USN Sept 1939 to Aug 1940

- COMDR. HARVEY MILLER, MC, USN Aug 1940 to May 1941
- COMDR. I. JACOBS, MC, USN May 1941 to March 1942
- CAPTAIN C. M. GEORGE, MC, USN March 1942 to June 1943
- COMDR. H. W. PATTON, MC, USN June 1943 to Sept 1943
- CAPTAIN C. W. LANE, MC, USNR Oct 1943 to Aug 1950
- COMDR. F. O. HUNTSINGER, MSC, USN Aug 1950 to June 1953
- CAPTAIN R. L. TAYLOR, MSC, USN June 1953 to Nov 1957
- COMDR. C. L. CRAWFORD, MSC, USN Nov 1957 —



Captain W. C. Calkins, MSC, USN, Chief, Medical Service Corps; Commander Crawford, inspect Corps School personnel.



INDOCTRINATION: Lieut. Comdr. Rice lectures new student company.

### CORPS SCHOOL ORGANIZATION

Organizationally the school consists of a commanding officer's office, which includes the executive and administrative officers and command secretary, and the four major operative divisions, each under the management of an experienced officer assigned by the executive officer within the authorized personnel allowances. The Administrative Officer, a lieutenant commander medical service corps, is the direct representative of the executive officer and succeeds to that office during the executive officer's temporary absence; he is responsible to the executive officer for the coordination and efficient operation of the command; for security, control and distribution of official mail; custody of master and central files; he is classification control officer and custodian of classified matter.

In addition to his major assignment as administrative officer for the command this officer performs such collateral duties as public information, legal assistance, historical, and senior watch officer; he is also president of a special court martial serving both the naval hospital and corps school.

He maintains active liaison with the several departments of the naval hospital upon which the school depends for logistical support.

### PERSONNEL-RECORDS DIVISION

Personnel-Records Division is responsible, under the direction of an Ensign, Medical Service Corps, with the title, Chief, Personnel-Records Division, and general supervision of the administrative office, for the proper and efficient custody, inspection and processing of staff and student personnel records, and for the preparation and transmittal of pertinent reports and correspondence.

The chief of the division also performs those collateral duties normally inherent in the personnel officer's billet, such as staff division officer, insurance officer, savings bonds and civil readjustment.



PERSONNEL RECORDS: Shirley M. Melton, Irene K. Jordan, Robert L. Brice, HMC; Robert A. Mullen, HM1; J. W. Harrington, HMC; Arthur H. Schrader, HMC; Victor C. Giuliani, CMSW-3.

### TRAINING DIVISION

The Training Division is responsible under the Executive Officer's direction for the administration of the training and educational program in its several phases, basic "A" school, advanced "B" school and pharmacy "C" school.

The chief of the division and the assistant chief of the division are officers of the Medical Service Corps, each with the rank of lieutenant. The present chief holds a baccalaureate degree in pharmacy and personally conducts the course of organic chemistry in pharmacy technic "C" school.

Assisting the training officers in the development and presentation of instruction materials is a staff of 41 leading petty officers of the Hospital Corps, qualified as instructors, and one civilian clerk-typist.

Responsibilities of the division include the preparation of curricula, lesson plans, instruction sheets, examinations, scholastic records and the proper indoctrination and evaluation of instructors and the methods of presentation.



CLIFTON A. ASCHE, Lieut., MSC Training Officer.



MALE INSTRUCTION STAFF HCS — First row, left to right: Harry W. Rohrer, HMC; Frank J. Lassor, HMC; Edward O. Williams, HMC; James C. Stewart, HMC; William P. Mistowski, HM1; Royce R. Hauth, HM1; Emil J. Minette, HM1; John C. Fisher, HM1; Donald R. Purdy, HM1; Joseph F. Musante, HM1; Herbert G. Garrelts, HMC; Gerald D. Russell, HMC; Don W. Rappolee, HMC. Second row, left to right: George S. Moore, HMC; James W. Kellar, HMC; Robert B. White, HMC; William M. Snyder, HMC; William R. Frederick, HMC; Albert Bosch, HMC; Frank R. Frost; HMC; Lieut. Clifton A. Asche, Lieut. William H. Jones; George E. Maddox, HMC; Aruid Steenken, HMC; Charles H. Daniels, HMC; James F. O'Dell, HMC.

### SECURITY DIVISION

The Security Division is responsible, under the direction of the Executive and Administrative officers, for the inspection and upkeep of buildings and grounds; for the procurement, custody and utilization of supplies and equipment; for maintaining an adequate fire-prevention training program, and for aggressive and continuous leadership in accident prevention.

The Chief of Division is an officer with the rank of commissioned warrant. He is assisted in the accomplishment of assigned functions by seven leading petty officers of the Hospital Corps as masters-at-arms.

Collateral duties of the security division chief consist of



SECURITY: W. B. Green, HM1; Wilfred I. Casler, Ensign, MSC, Security Officer; W. E. Darton, HMC.

student battalion commander and division officer, property officer, safety officer and instructor in military requirements. As battalion commander he is charged with the responsibility for selection, appointment, and supervision of the

company commanders and company petty officers. He conducts investigations and assists the commanding officer in conducting captain's mast for adjudication of disciplinary cases arising within the school command.



EXAMINING BOARD: Harry M. Rohrerer, HMC; James C. Stewart, HMC; Albert Bosch, HMC; Frank R. Frost, HMC; Chief Instructor. Dean W. Silliman, HMC, not shown.



OOD's OFFICE: Jim Waits, HMC.

COFFEE MESS: Bill Frederick, HMC; Chief Silliman; John Haws, HMC; Chief Frost; John C. Fischer, HM1; Irene R. Jordan, civilian; Bill Darton, HMC.





STUDENT POURS for instructors Haws, Frederick.



SKULL STUDY: K. C. Smith, HSHA; J. A. Stiver, HM1.

COMMANDER DOROTHY E. JONES, NC, USN Chief, Nursing Division

### HOSPITAL CORPS SCHOOL

### NURSING DIVISION

The Nursing Division, under the executive officer's direction, and normally headed up by the senior officer of the Nurse Corps attached, as Chief of Division, is responsible for the preparation of curricula, lesson plans, and instructional materials and methods of presentation for the course in Principles and Technics of Patient Care.

These courses approximate one-third of the total number of hours in the basic "A" school program, and a significant portion of the advanced "B" school of instruction.

The Chief of Division, currently with the rank of commander, is assisted in the accomplishment of the patient care training functions by eighteen additional officers of the Nurse Corps, the majority being senior officers, all with baccalaureate degrees and having considerable training and experience in the educational field.



CORPS SCHOOL NC OFFICERS—Back row, left to right: Lucy A. Job, Lieut.; Bettyann Auman, Lieut.; Vertie C. Caswell, Lieut.; Marion E. Weden, Lieut. Comdr.; Marion L. Morgan, Lieut. Comdr.; Lois A. Andrews, Lieut. Comdr.; Gladys Madsen, Lieut., Imogene L. Vesper, Lieut.; Nancy L. Stagg, Lieut. Front row, left to right: Marion B. Haire, Lieut. Comdr.; Ruth I. Morgan, Lieut. Comdr.; Grace E. Jacobs, Lieut. Comdr.; Dorothy E. Jones, Comdr.; Emilie L. Fisher, Lieut. Comdr.; Diana Kudritzen, Lieut. Comdr.; Edith F. Gorman, Lieut. Comdr.

# STUDENT REPORTS ABOARD



ARRIVAL: F. E. Casebeer, SA, new student.



OOD's OFFICE: Second step for Student Casebeer.



PERSONNEL OFFICE: Third step.



TRAINING OFFICER looks him over.



MIMEO ROOM: "Now go to Security."



SECURITY and Battalion Commander's office.



HEALTH RECORD left at Dispensary.



TRAINING AIDS: Good place to know.



NEW STUDENT enters barracks.



GETS BEDDING ...



ASSIGNED BUNK ...



INSTRUCTOR GREETS HIM . . .



LIEUT. COMDR. RICE gives him the word . . .



LIEUT. ASCHE indoctrinates . . .

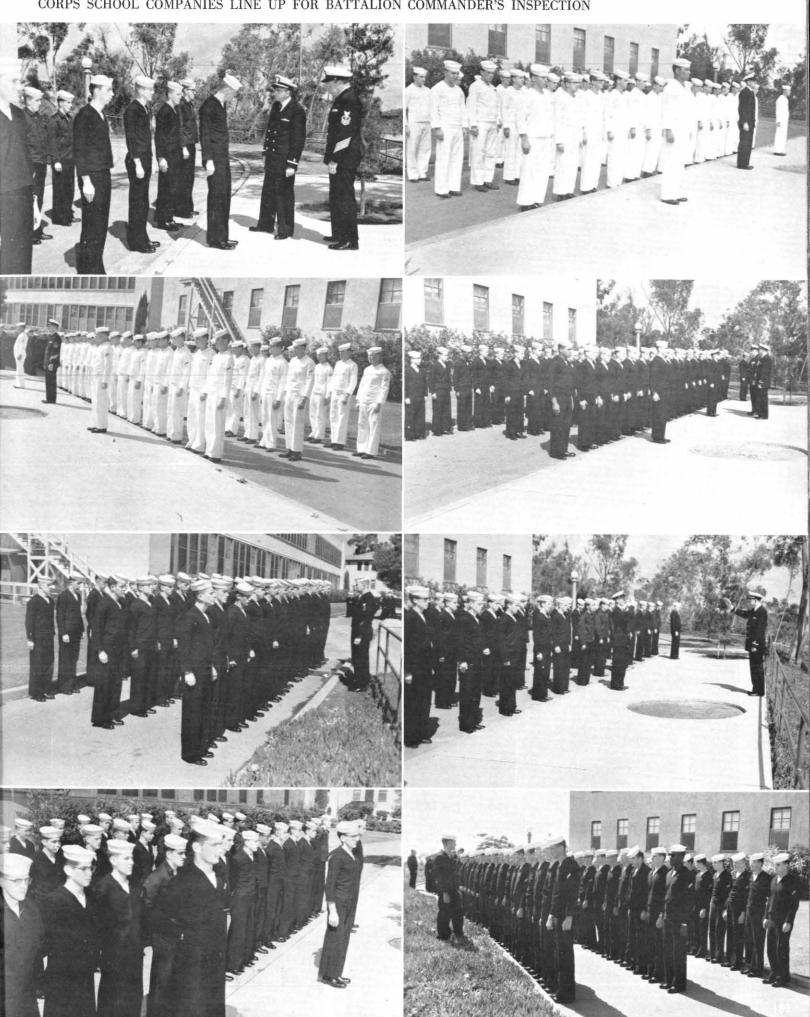


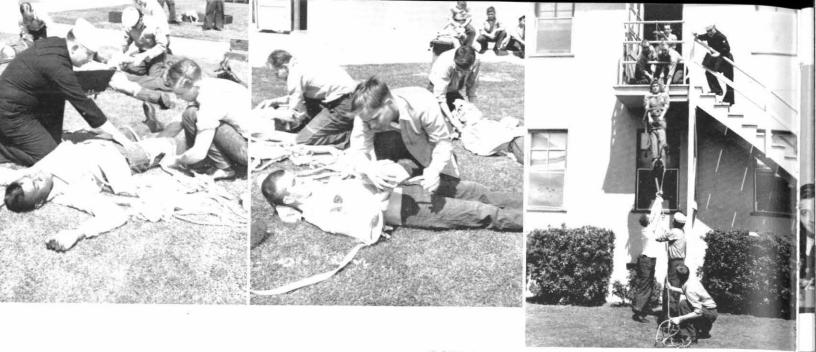
CHAPLAIN Robert B. Dunbar, Lieut. (j.g.), builds morale . . .



AND HERE he is all attention, eager to learn.

CORPS SCHOOL COMPANIES LINE UP FOR BATTALION COMMANDER'S INSPECTION





## TRAINEE CORPSMEN PRACTICE ON "MR. DISASTER" — AND EACH OTHER.

Three views show bandaging training on ground—prone "Victims." *Upper right*, students learn how to lower stretcher case from raised point.

Lower left: Instructor G. H. Garrelts, HMC, uses "Mr. Disaster" to give first aid lesson. Right, Chief Haws demonstrates "Mr. Disaster" to Press group and DACOWITS.







# LABORATORY



DETECTING bacteria with microscope



INSTRUCTOR F. J. Lassor, HMC, watches class.



PHARMACY students . . .



GETTING practice



HOW TO measure drugs . . .



LABORATORY technique.

## **CLASSROOMS**



ANATOMY class...



MEDICINES lecture by Chief Frederick.



NURSING lecture by Imogene L. Vesper, Lieut., NC.



PHYSIOLOGY talk . . .



INTRAMUSCILLAR



INJECTIONS . .



INSTRUCTION.



INTRAVENOUS lessons.



MAKING Bed technique . . .



FOLD IT back just so . . .



BED TRAINING important . . .



HANDLING bed patients . . .



BATHING in bed . . .



ORAL Medicine lesson.

### STUDENTS VISIT HOSPITAL WARDS



NURSING Indoctrination . . . Chest Surgery . . .



NEUROSURGERY ...



ORTHOPEDICS...



EDICS... W.



UROLOGY... ORAL MEDICATION...



CARDIAC Ward class.

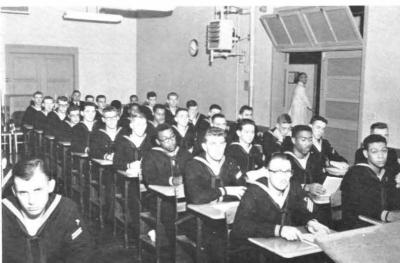


GRADUATING Class hears Lieut. Asche . . .

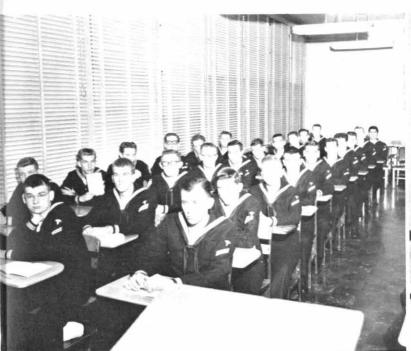
HONOR Student C. C. Clowers, Jr., HA, addresses class . . .



GRADUATES hear guest speaker, Robert M. Cain, Lieut., MSC . . .



HALF of Graduating class . . .



HERE'S the other half . . .



COMDR. Crawford awards certificates, Chief Rohrer assists.



GRADUATION Program starts . . .



GUEST Speaker Lieut, Comdr. W. F. Lester, USNH, Camp Pendelton, at Pharmacy School graduation . . .



STAFF and guests . . .

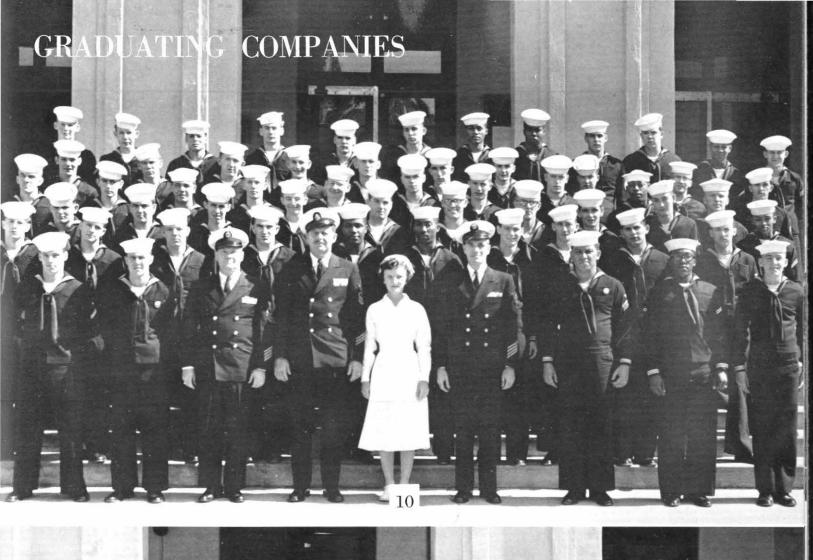




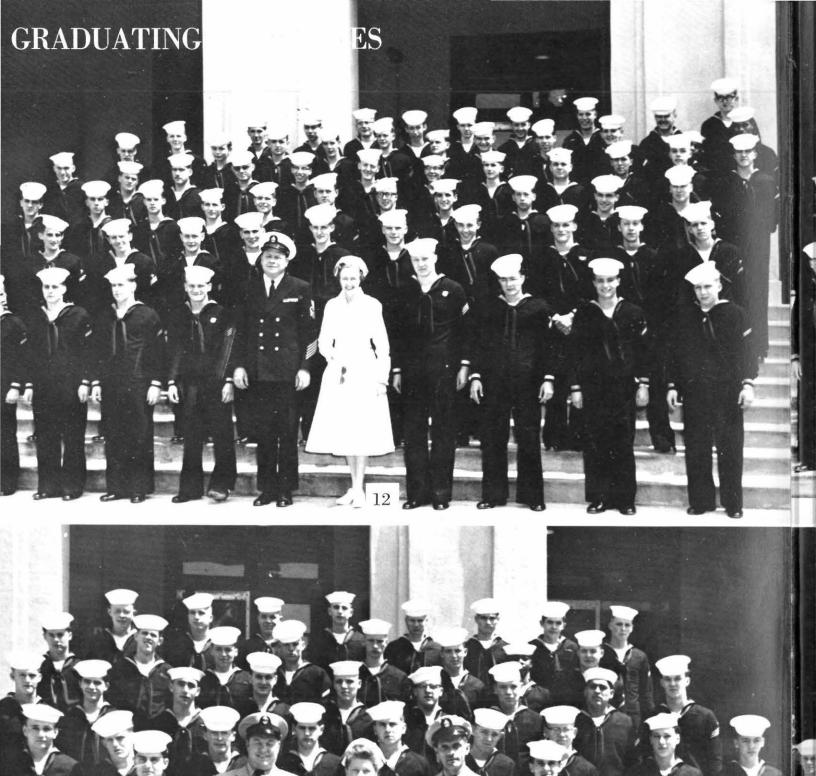
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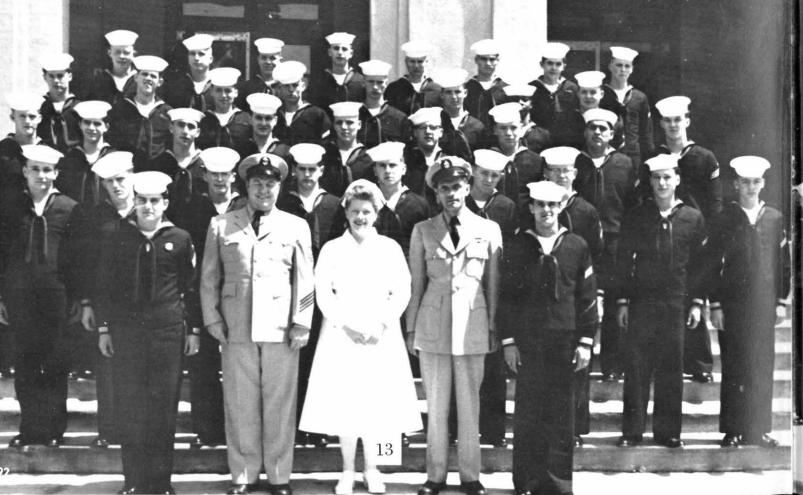
TO GET ...

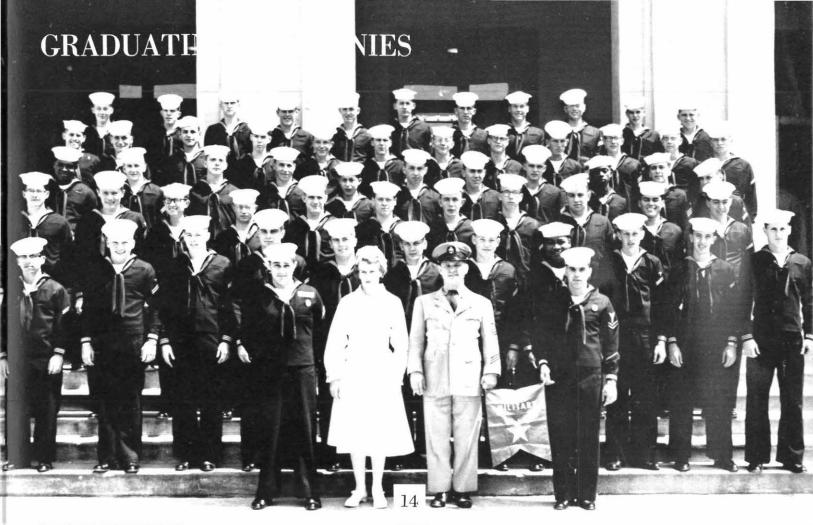
THEIR DIPLOMAS.

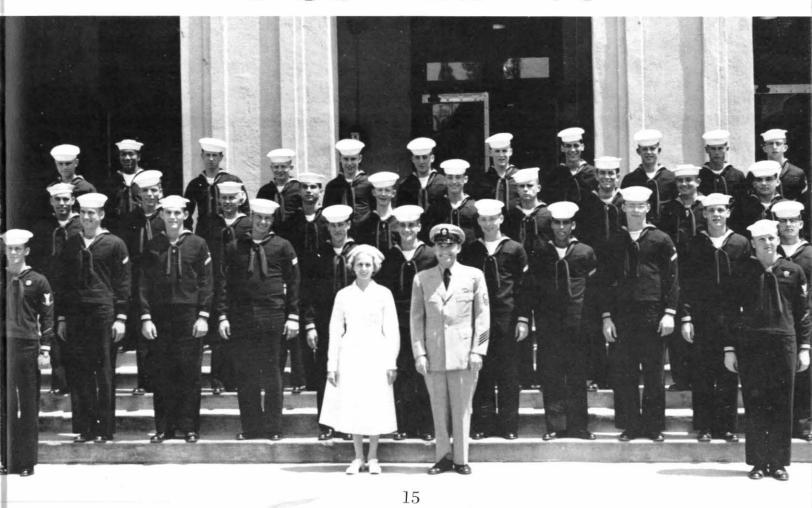


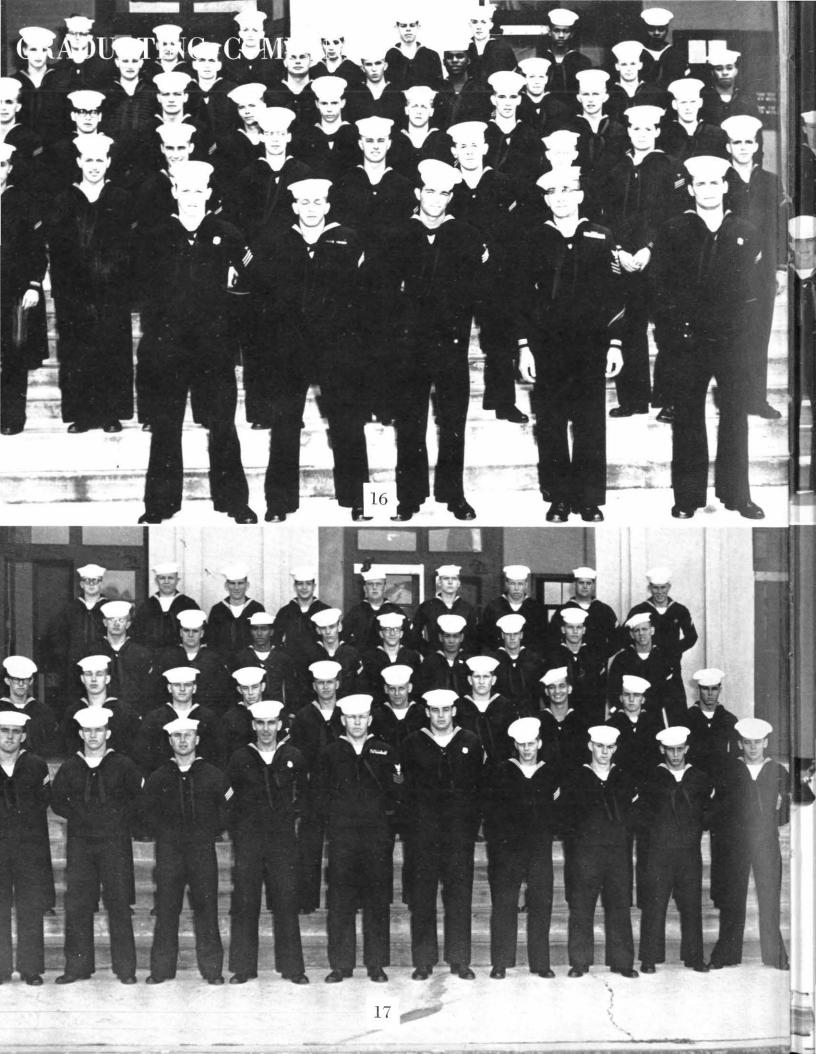


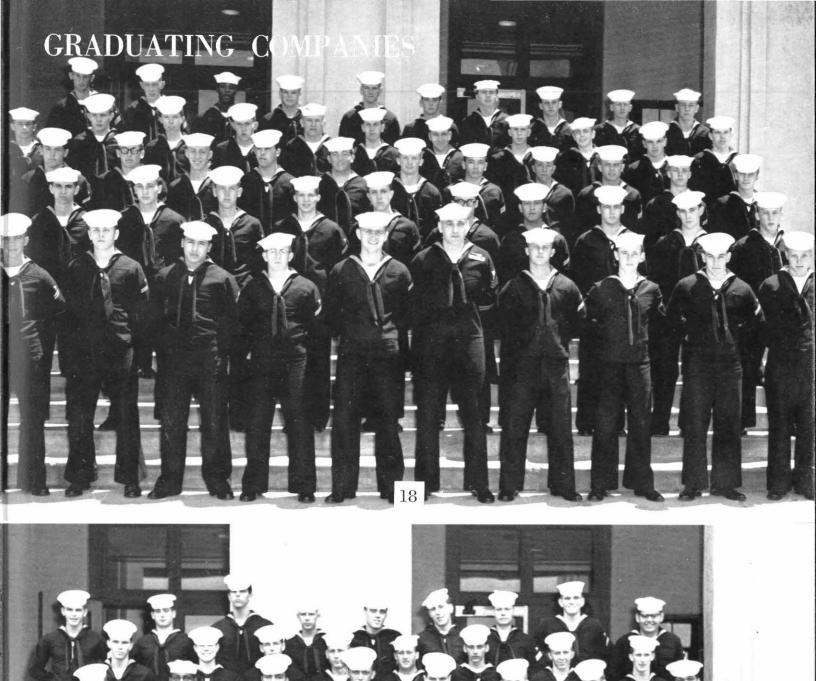


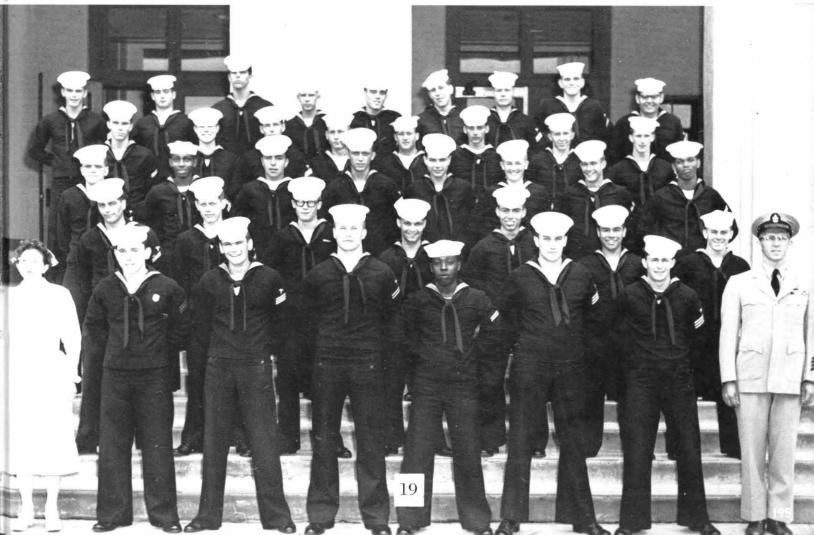


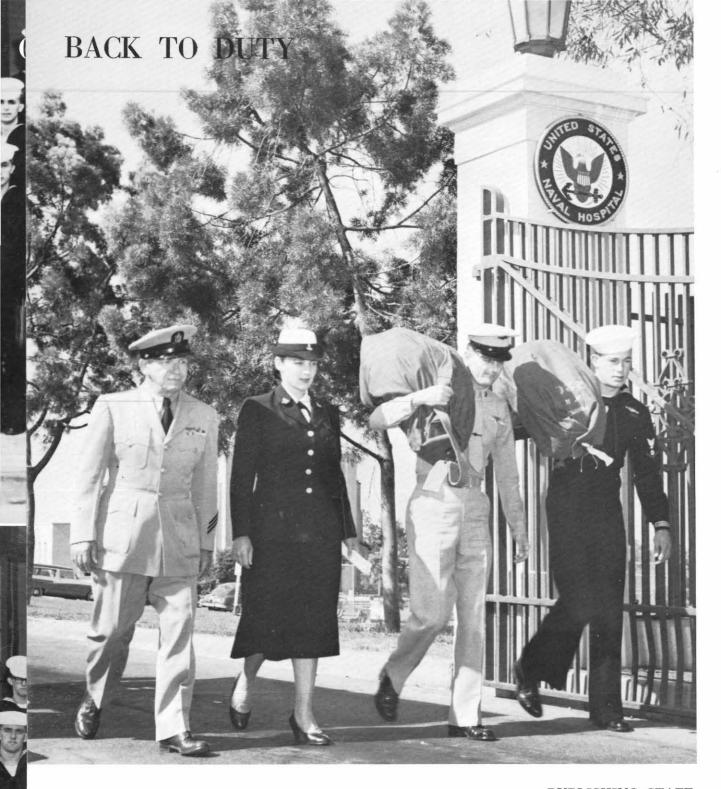












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